

TEMPLATE															
June 25, 2021															
	Full Name  <i>(Art. 1.01)</i>	HCPs: City of Principal Practice HCOs: city where registered  <i>(Art. 3)</i>	Country of Principal Practice  <i>(Schedule 1)</i>	Principal Practice Address  <i>(Art. 3)</i>	Unique country local identifier <i>OPTIONAL</i>  <i>(Art. 3)</i>	Donations and Grants to HCOs <i>(Art. 3.01.1.a)</i>	Contribution to costs of Events <i>(Art. 3.01.1.b &amp; 3.01.2.a)</i>			Fee for service and consultancy <i>(Art. 3.01.1.c &amp; 3.01.2.c)</i>		Transfers of Value re Research & Development as defined <i>(Art. 3.04)</i>	TOTAL <i>OPTIONAL</i>		
							Sponsorship agreements with HCOs / third parties appointed by HCOs to manage an Event	Registration Fees	Travel & Accomodation	Fees	Related expenses agreed in the fee for service or consultancy contract				
INDIVIDUAL	HCPs	<i>INDIVIDUAL NAMED DISCLOSURE - one line per HCP (i.e. all transfers of value during a year for an individual HCP will be summed up: itemization should be available for the individual Recipient or public authorities' consultation only, as appropriate)</i>													
							N/A	N/A	0,00	0,00	0,00	0,00	N/A	0,00	
		<i>OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons</i>													
		<b>Aggregate amount attributable to transfers of value to such Recipients - Art. 3.2</b>						N/A	N/A	510,00	1.320,00	0,00	0,00	N/A	1.830,00
		<b>Number of Recipients (named list, where appropriate) - Art. 3.2</b>						N/A	N/A	1,00	1,00	0,00	0,00	N/A	1,00
	<b>% of total transfers of value to individual HCPs - Art. 3.2</b>						N/A	N/A	100	100	%	%	N/A	N/A	
	HCOs	<i>INDIVIDUAL NAMED DISCLOSURE - one line per HCO (i.e. all transfers of value during a year for an individual HCO will be summed up: itemization should be available for the individual Recipient or public authorities' consultation only, as appropriate)</i>													
		HCO 1					N/A	N/A	0,00	0,00	0,00	0,00	N/A	Optional	
		<i>OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons</i>													
		<b>Aggregate amount attributable to transfers of value to such Recipients - Art. 3.2</b>						Aggregate HCOs	Aggregate HCOs	Aggregate HCOs	Aggregate HCOs	Aggregate HCOs	Aggregate HCOs	N/A	Optional
<b>Number of Recipients (named list, where appropriate) - Art. 3.2</b>						0,00	0,00	0,00	0,00	0,00	0,00	N/A	Optional		
<b>% of total transfers of value to individual HCOs - Art. 3.2</b>						%	%	%	%	%	%	N/A	N/A		
AGGREGATE	<b>AGGREGATE DISCLOSURE</b>														
	N/A	N/A	N/A	N/A	N/A	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL	TOTAL AMOUNT	OPTIONAL		