

TEMPLATE														
Disclosure Date: June 2025														
	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 OPTIONAL <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 & 3.01.2.a)</i>			Fee for service and consultancy <i>(Art. 3.01.1.c & 3.01.2.c)</i>		Transfers of Value re Research & Development as defined <i>(Art. 3.04)</i>	TOTAL OPTIONAL	
							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	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)												
		Caroline Gouder					N/A	N/A	0,00	1.012,46	0,00	0,00	N/A	1.012,46
		OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons												
		Aggregate amount attributable to transfers of value to such Recipients - Art. 3.2					N/A	N/A	0,00	0,00	0,00	0,00	N/A	0,00
		Number of Recipients (named list, where appropriate) - Art. 3.2					N/A	N/A	0,00	0,00	0,00	0,00	N/A	0,00
		% of total transfers of value to individual HCPs - Art. 3.2					N/A	N/A	%	%	%	%	N/A	N/A
	HCOs	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)												
							0,00	0,00	N/A	N/A	N/A	N/A	N/A	0,00
		OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons												
		Aggregate amount attributable to transfers of value to such Recipients - Art. 3.2					Aggregate HCOs	Aggregate HCOs	Aggregate HCOs	Aggregate HCOs	Aggregate HCOs	Aggregate HCOs	N/A	Optional
		Number of Recipients (named list, where appropriate) - Art. 3.2					0,00	0,00	0,00	0,00	0,00	0,00	N/A	Optional
		% of total transfers of value to individual HCOs - Art. 3.2					%	%	%	%	%	%	N/A	N/A
AGGREGATE	AGGREGATE DISCLOSURE													
	N/A	N/A	N/A	N/A	N/A	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL	TOTAL AMOUNT	OPTIONAL	