							TEMPLA	TE						lune 30, 2022	
		Full Name	HCPs: City of Principal Practice HCOs: city where registered Practice Practice Practice Practice Practice Practice Practice Address Practice Donations and Principal Practice Donations and				11.1.b & 3.01.2.a)	Fee for service and consultancy (Art. 3.01.1.c & 3.01.2.c)		Transfers of Value re					
		(Art. 1.01)	(Art. 3)	(Schedule 1)	(Art. 3)	(Art. 3)	Grants to HCOs (Art. 3.01.1.a)	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	г	TOTAL OPTIONAL	
		INDIVIDU	AL NAMED DISCLOS	URE - one line per HO	CP (i.e. all transfers of	value during a year fo	r an individual HCP wi	ll be summed up: itemi:	zation should be availa	able for the individual F	Recipient or public auth	norities' consultation or	nly, as appropriate)		
							N/A	N/A	0,00	0,00	0,00	0,00	N/A	0,00	
	нсРѕ				OTHER,	NOT INCLUDED ABO	VE - where information	n cannot be disclosed	on an individual basis	for legal reasons					
	Ť	Aggregate amount attributable to transfers of value to such Recipients - Art. 3.2					N/A	N/A	391,00	0,00	0,00	0,00	N/A	391,00	
AL A		Number of Recipients (named list, where appropriate) - Art. 3.2					N/A	N/A	1,00	0,00	0,00	0,00	N/A	1,00	
DG		% of total transfers of value to individual HCPs - Art. 3.2					N/A	N/A	100	100	%	%	N/A	N/A	
INDIVIDUAL		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)													
€		HCO 1					N/A	N/A	0,00	0,00	0,00	0,00	N/A	Optional	
	нсоѕ	OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons													
	¥	Aggregate amount attribute	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	
								•				•			
Щ		AGGREGATE DISCLOSURE													
- - - -		N/A	N/A	N/A	N/A	N/A	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL	OPTIONAL	TOTAL AMOUNT	OPTIONAL	