					STAN	DARDISED DISCL	OSURE TEMPLAT	E			DATE OF PUBLIC	ATION:	30 June 2025	
	Full name					Donations and	Contribution to costs of Events			Fee for Services and consultancy				
		Principal Practice HCOs: city where registered	Principal Practice	Practice Address	identifier (optional)	grants to HCOs	Sponsorship agreements with HCOs /Thrid Parties appointed by HCOs to manage Event	Registration Fees	Travel & Accommodation	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accommodation relevant to the contract		<b>TOTAL</b> Optional	
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)													
-														
	OTHER, NOT INCLUDE	D ABOVE – where i	information cann	ot be disclosed o	n an individual b	asis for legal reaso	ons							
	Aggregate amount attributable to ToV to such Recipients					N/A	N/A	Aggr. HCPs	Aggr. HCPs	Aggr. HCPs	Aggr. HCPs		Optional	
	Number of Recipients in aggregate disclosure					N/A	N/A	number	number	number	number		Optional	
	% of the number of Recipients included in the aggregate disclosure in the total number, by category, of Recipients disclosed					N/A	N/A	%	%	%	%		N/A	
s	INDIVIDUAL NAMED DISCLOSURE – one line per HCO (i.e. all Transfers of Value during a year						al HCO will be sumr	ned un: itemization	should be available	e for the individ	ual Recipient or public	authorit	ies' consultation	
HCOS	only as appropriate)							neu up. nemization	i should be available			authorit	consultation	
Т	HCO 1						3600						3600	
							without VAT 2500							
	HCO 2						without VAT						2500	
	HCO 3						2520							
							without VAT						2520	
	HCO 4						500						500	
							Without VAT						500	
	OTHER, NOT INCLUDED ABOVE – where information cannot be disclosed on an individual basis for legal reasons													
	Aggregate amount attributable to ToV to such Recipient					Aggr. HCOs	Aggr. HCOs	Aggr. HCOs	Aggr. HCOs	Aggr. HCOs	Aggr. HCOs		Optional	
	Number of Recipients in aggregate disclosure % of the number of Recipients included in the aggregate disclosure in the total number, by					number	number	number	number	number	number		Optional	
	% of the number of R category, of Recipients	-	in the aggregate	disclosure in the	total number, by	%	%	%	%	%	%		N/A	
AGGREGATE DISCLOSURE														
Research & Development Transfers of Value for Research & Development										TOTAL	OPTIONAL			