ALLEGATO 1

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	Full Name	**HCPs:** City of Principal Practice **HCOs:** city where registered **POs**: City where registered	Country of Principal Practice	Principal Practice Address	Unique country identifier OPTIONAL	Donations and Grants to HCOs and POs	Contribution to costs of Events			Fee for service and consultancy			**TOTAL OPTIONAL**
							Sponsorship agreements with HCOs, POs/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, including travel & accommodation relevant to the contract		
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)***												
	Dr. A					N/A	N/A	Yearly amount	Yearly amount	Yearly amount	Yearly amount		
	Dr. B					N/A	N/A	Yearly amount	Yearly amount	Yearly amount	Yearly amount		
	etc.					N/A	N/A	Yearly amount	Yearly amount	Yearly amount	Yearly amount		
	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					N/A	N/A	Aggregate HCPs 8251,81 €	Aggregate HCPs 11956,05 €	Aggregate HCPs	Aggregate HCPs		Optional
	Number of Recipients in aggregate disclosure					N/A	N/A	number 28	number 14	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
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)***												
	HCO 1					Yearly amount	Yearly amount	Yearly amount	Yearly amount	Yearly amount	Yearly amount		Optional
	HCO 2					Yearly amount	Yearly amount	Yearly amount	Yearly amount	Yearly amount	Yearly amount		Optional
	etc.					Yearly amount	Yearly amount	Yearly amount	Yearly amount	Yearly amount	Yearly amount		Optional
	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					Aggregate HCOs	Aggregate HCOs	Aggregate HCOs	Aggregate HCOs	Aggregate HCOs	Aggregate HCOs		Optional
	Number of Recipients in aggregate disclosure					number	number	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
POs	***INDIVIDUAL NAMED DISCLOSURE - one line per PO (i.e. all transfers of value during a year for an individual PO will be summed up: itemization should be available for the individual Recipient or public authorities' consultation only, as appropriate)***												
	PO 1					Yearly amount	Yearly amount	Yearly amount	Yearly amount	Yearly amount	Yearly amount		Optional
	PO 2					Yearly amount	Yearly amount	Yearly amount	Yearly amount	Yearly amount	Yearly amount		Optional
	etc.					Yearly amount	Yearly amount	Yearly amount	Yearly amount	Yearly amount	Yearly amount		Optional
	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					Aggregate POs	Aggregate POs	Aggregate POs	Aggregate POs	Aggregate POs	Aggregate POs		Optional
	Number of Recipients in aggregate disclosure					number	number	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
R&D	***AGGREGATE DISCLOSURE***												
	Transfers of Value Research & Development as defined in the Code											TOTAL AMOUNT 20207,86	OPTIONAL