

	Full Name	HCPs: City of Principal Practice HCOs: city where registered	Country of Principal Practice	Principal Practice Address	Unique identification number <i>OPTIONAL</i>	Donations and Grants to HCOs (Art. 3.01.1.a)	Contribution to costs of Events (Art.3.01. 1.b & 3.01.2a)			Fee for service and consultancy (Art. 3.01.1.c & 3.01.2c)		TOTAL
							Sponsorships agreements with HCOs / third parties appointed by HCOs to manage an Event	Registrations Fees	Travel & Accomodation	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accommodation relevant to the contract	
(Art. 1.01)	(Art. 3)	(Schedule 1)	(Art. 3)									
<b>INDIVIDUAL NAMED DISCLOSURE - one line per HCP</b>												
<b>OTHER, NOT INCLUDED ABOVE</b>												
HCPs	<b>Aggregate amount attributable to transfers of value to such Recipients - Art. 3.02</b>				EUR							
	<b>Number of Recipients in aggregate disclosure - Art. 3.02</b>				Number							
	<b>% of the number of Recipients included in the aggregate disclosure in the total number of Recipients disclosed - Art. 3.02</b>				%							
<b>INDIVIDUAL NAMED DISCLOSURE - one line per HCO</b>												
HCOs	ALFORMEC	2680	Luxembourg	29, rue de Vianden			700 €					700 €
	<b>OTHER, NOT INCLUDED ABOVE</b>											
	<b>Aggregate amount attributable to transfers of value to such Recipients - Art. 3.02</b>				EUR							
	<b>Number of Recipients in aggregate disclosure - Art. 3.02</b>				Number							
<b>% of the number of Recipients included in the aggregate disclosure in the total number of Recipients disclosed - Art. 3.02</b>				%								
<b>AGGREGATE DISCLOSURE</b>												
R&D	Transfers of value associated to Research & Development as defined in art. 44quater.5										TOTAL AMOUNT	0