	Full Name (Mandatory) (Art. 18.1)	Healthcare Professionals (HCPs): city of principal practice Healthcare Organisations (HCOs): city where registered (Mandatory) (Art. 18.3)	Country of Principal Practice (Optional) (Art. 18.3)	Principal Practice Address (Optional) (Art. 18.3)	DNI / CIF XXX1234XX (Mandatory) (Art. 18.3)	Donations (Art.18.3.1.a)	Contribution to educational and scientific meetings (Art. 18.3.1.b & 18.3.2.a)			Fees for service (Art. 18.3.1.c & 18.3.2.b)		TOTAL
							Sponsorship agreements with HCOs / third parties appointed by HCOs to manage an Event	Registration Fees	Travel & Accommodation	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accommodation	
Healthcare Professionals (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. Itemisation should be available for the individual HCP or public authorities' consultation only as appropriate.)											
						Not applicable	Not applicable					
	INFORMATION NOT INCLUDED ABOVE: where information cannot be disclosed on an individual basis for legal reasons.											
	Aggregate amount attributable to Transfers of Value to HCPs – Article 18.4					Not applicable	Not applicable					
	Number of HCPs disclosed at aggregate level – Article 18.4					Not applicable	Not applicable					
	% of total Transfers of Value to HCPs – Article 18.4					Not applicable	Not applicable					Not applicable
Healthcare Organization (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. Itemisation should be available for the individual HCO or public authorities' consultation only as appropriate.)											
Research and Development	**AGGREGATE DISCLOSURE**											
	Transfers of Value related to Research & Development – Article 18.5											500