| | Full Name<br>(Mandatory)<br>(Art. 18.1) | Healthcare Professionals (HCPs): city of principal practice<br>Healthcare Organisations (HCOs): city where registered<br>(Mandatory)<br>(Art. 18.3) | Country of Principal Practice<br>(Optional)<br>(Art. 18.3) | Principal Practice Address<br>(Optional)<br>(Art. 18.3) | DNI / CIF XXX1234XX<br>(Mandatory)<br>(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 | | | | | |
| | | | | | | Not applicable | Not applicable | | | | | |
| | | | | | | Not applicable | Not applicable | | | | | |
| | | | | | | Not applicable | Not applicable | | | | | |
| | | | | | | Not applicable | Not applicable | | | | | |
| | | | | | | Not applicable | Not applicable | | | | | |
| Healthcare Professionals (HCPs) | **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.) | | | | | | | | | | | |
| | EUROPEAN FOUNDATION EF CLIF | Barcelona | Spain | | G66519000 | 500.000,00 | | | | | | 500.000,00 |
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| **Research and Development** | **AGGREGATE DISCLOSURE** | | | | | | | | | | | |
| | **Transfers of Value related to Research & Development – Article 18.5** | | | | | | | | | | | 282.654,00 |