Full Name (Art. 1.01)	HCPs: City of Principal Practice HCOs: city where registered (Art.	Country of Principal Practice	Principal Practice Address (Art. 3)	Unique Country Local Identifier (Art. 3)		Contribution to Costs of Events (Art. 3.01.1.b & 3.01.2.a)			Fee for Se	rvice and Consultancy (Art. 3.01.1.c & 3.01.2.c)	
						Sponsorship agreements with HCOs / third parties appointed by HCOs to manage an Event	Registration Fees	Travel & Accommoda tion	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accommodation relevant to the contract	TOTAL
	NAMED DISCLOS		CP (i.e. all transfers of v	value during a year	for an individual HCF	will be summed up: itemizat	ion should be avail	able for the indi	vidual Recip	ient or public authorities'	
DE WILDE , SIGRID	LUXEMBOURG		RUE NICOLAS ERNEST BARBLE 4		N/A	N/A	140.00	839.00			979
HADJI, HASSAN	LUXEMBOURG		RUE SAINTE ZITHE 36		N/A	N/A	,	750,4			750,4
JACOB , FRANK	ETTELBRUCK	LU	AVENUE LUCIEN SALENTINY 120		N/A	N/A	900				900
RIES , FERNAND	LUXEMBOURG	LU	RUE NICOLAS ERNEST BARBLE 4		N/A	N/A	700	920,38			1.620,38
OTHER, NOT	INCLUDED ABO	VE - where informatio	on cannot be disclosed c	on an individual bas	is for legal reasons						
Aggregate amount attributable to transfers of value to such Recipients - Art. 3.02					N/A	N/A	650	867,44			1.517,44
		ate disclosure - Art. 3			N/A	N/A	1	1	0	0	1
% of number of Recipients in the aggreate disclosure in the total number of Recipients disclosed - Art. 3.02				N/A	N/A	25%	25%			20%	
INDIVIDUAL	NAMED DISCLOS	SURE - one line per H	CO (i.e. all transfers of v	value during a year	for an individual HC	O will be summed up: itemiza	tion should be avai	lable for the ind	ividual Recip	pient or public authorities' consultat	tion only, as appropriate)
CENTRE FRANÇOIS BACLESSE	ESCH-SUR- ALZETTE	LU	BOÎTE POSTALE 436			1.300,00					1.300,00
CENTRE HOSPITALIE R DE LUXEMBOU RG	LUXEMBOURG	111	RUE NICOLAS- ERNEST BARBLE 4			2,500,00			500		3,000.00
INTERNATIC NAL QUALITY NETWORK OF PATHOLOG Y ASBL			BOULEVARD ROYAL 17			25.000,00			300		25.000,00

Full Name (Art. 1.01)	HCPs: City of Principal Practice HCOs: city where registered (Art. 3)	Country of Principal Practice	Principal Practice Address (Art. 3)	Unique Country Local Identifier (Art. 3)		Contribution to Costs of Events (Art. 3.01.1.b & 3.01.2.a)				rvice and Consultancy (Art. 3.01.1.c & 3.01.2.c)	
						Sponsorship agreements with HCOs / third parties appointed by HCOs to manage an Event	Registration Fees	Travel & Accommoda tion	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accommodation relevant to the contract	TOTAL
SOCIÉTÉ LUXEMBOU RGEOISE D'ANDROPA USE ET MÉNOPAUS E (SLAM)	LUXEMBOURG		RUE PIERRE FEDERSPIEL 9			750					750
SOC. LUXEMBOU RGEOISE CARDIOLOG IE	LUXEMBOURG		RUE NICOLAS ERNEST BARBLÉ 2A			2.450,00					2.450,00
OTHER, NOT	OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons										
Aggregate am	Aggregate amount attributable to transfers of value to such Recipients - Art. 3.02										
Number of Recipients in aggregate disclosure - Art. 3.02					0	0	0	0	0	0	0
% of number of Recipients in the aggreate disclosure in the total number of Recipients disclosed - Art. 3.02						0%			0%		0%
AGGREGATE DISCLOSURE											
	Transfers of Value re Research & Development as defined - Article 3.04										250