

Appendix 1 - Standardised Template							Date of Publication: 27-06-2025		
Transfers of Value received by Healthcare Professionals									
	First name and surname	Full address of the main place of business	Expenses incurred in relation to the Events		Compensation for services				Total
			Registration fees	Travel and accommodation	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accomdation relevant to the contract			
Representatives of Medical Professions	INDIVIDUAL DISCLOSURE								
	Sergiusz Jozwiak	Tadzycka 12, Warszawa, PL	0,00	0,00	8542,00	0,00			8542,00
	Zofia Maria Szmit	ul.Borowska 213, Wroclaw, PL	0,00	0,00	1000,00	0,00			1000,00
	AGGREGATE DISCLOSURE								
	Total Transfers of Value received by Beneficiaries								0,00
	Number of Beneficiaries covered by the aggregate disclosure								0
	Percentage of Beneficiaries covered by the aggregate disclosure								0%
Transfers of Value received by healthcare Organisations									
Healthcare Organizations	Name	Full address of the main place of business	Donations	Expenses incurred in relation to the Events			Compensation for services		Total
				Registration fees	Travel and accommodation	Sponsorship agreements with HCOs/third parties appointed by HCOs to manage an Event	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accomdation relevant to the contract	
	INDIVIDUAL DISCLOSURE								
	AGGREGATE DISCLOSURE								
	Total Transfers of Value received by Beneficiaries								0,00
	Number of Beneficiaries covered by the aggregate disclosure								0
	Percentage of Beneficiaries covered by the aggregate disclosure								0%
R&D	Transfers of Value relating to Research and Development								
	Total Amount Associated with Research and Development Activities								