Schedule 2 Template												25 06 2021
Full Name	HCPs: City of Principal Practice HCOs: city where registered	Country of Principal Practice	Principal Practice Address	Unique Country Identifier OPTIONAL		Contribution to costs of Events (Art. 3.01.1.b & 3.01.2.a)			Fee for service and consultancy (Art. 3.01.1.c & 3.01.2.c)		Date of Publicatio	577: 25-06-2021
(Art.1.01)	(Art.3)	(Schedule1)	(Art.3)	(Art.3)	Donations and Grants to HCOs (Art. 3.01.1.a)	Sponsorship agreements with HCOs/third parties appointed by HCOs to manage an Event	Registration Fees	Travel & Accomodation	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accomdation relevant to the contract		Total Optional
			of value during a year for an indiv	vidual HCP will be s	summed up: itemiz	ation should be avail	able for the individ	lual Recipient or public authoritie	s' consultation only, a	is appropriate)	1	
Aerts, Erik	Zürich	Switzerland	Rämistrasse 100					44				44
Bacher, Vera Ulrike	Bern	Switzerland	Freiburgstrasse 18						1900			1900
Chalandon, Yves	Genève	Switzerland	Rue Gabrielle-Perret-Gentil 4						2400			2400
Diesch, Tamara	Basel	Switzerland	Spitalstrasse 33						1900			1979
Gungor, Tayfun	Zurich	Switzerland	Spiegelhofstrasse						2400			2400
Lehmann, Thomas	St Gallen	Switzerland	Rorschacher Strasse 95						1900			1900
Pabst. Thomas	Bern	Switzerland	Freiburgstrasse 41G						1615			1615
Schanz, Urs	Zürich	Switzerland	Rämistrasse 100						1900			1900
Wolfensberger, Nathan Hans	Zurich	Switzerland	Rämistrasse 100						968			968
Wolensberger, Nathan Hans	Zunch		R, NOT INCLUDED ABOVE - W	here information ca	annot he disclosed	on an individual has	is for legal reasons		900		I	000
Annuante amount attaikutakia ta tamafara af uskus ta ausk Dasinian	·-				1		765.97	1936.70	1350	180.02	1	4232.69
	Aggregate amount attributable to transfers of value to such Recipients						4	2	2	1		42.32.03
Number of Recipients in aggregate disclosure							100%	67%	20%	100%		0
% of the number of Recipients included in the aggregate disclosure i												
INDIVIDUAL NAMED	DISCLOSURE - one line p	per HCO (i.e. all transfers	of value during a year for an indiv	vidual HCO will be :	summed up: itemiz	ation should be avai	lable for the individ	lual Recipient or public authoritie	s' consultation only, a	as appropriate)		
Blutspende SRK Schweiz AG	Bern	Switzerland	Laupenstrasse, Postfach			2500						2500
CHUV	Lausanne	Switzerland	Rue du Bugnon 21				542	825	4185			5552.1
Congrex Schweiz Ltd	Basel	Switzerland	Reinacherstrasse 131			16949.19						16949.19
Ente Ospedaliero Cantonale (EOC)	Bellizona	Switzerland	Viale Officina 3			2000			1500			3500
European Sleep Foundation	Lugano	Switzerland	Viale S. Franscini 9			53150						53150
HNHCP - Haematology Nurses & Healthcare Professionals Group	Winterthur	Switzerland	Winterthur-Nord			8055.75						8055.75
Hopitaux Universitaires de Geneve	Genève	Switzerland	Rue Gabrielle-Perret-Gentil 4						6960			6960
Insel Gruppe AG	Bern	Switzerland	Freiburgstrasse 18						1900			1900
International Society of Paediatric Oncology	Steinhausen	Switzerland	Industriestrasse 25			50427.3						50427.3
Kantonsspital St. Gallen	St. Gallen	Switzerland	Rorschacher Strasse 95			2,000						2000
Luzerner Kantonsspital	Luzern	Switzerland	Spitalstrasse 16						1520			1520
Universitatsspital Basel	Basel Unispital	Switzerland	Spitalstrasse 21						2400			2400
					0	0	0	0	0	0		0
Aggregate amount attributable to transfers of value to such Recipients Number of Recipients in aggregate disclosure					0	0	0	0	0	0		0
Number of Recipients in aggregate disclosure % of the number of Recipients included in the aggregate disclosure in the total number of Recipients disclosed					0	0	0	0	0	0		0
76 or the number of Recipients included in the aggregate disclosure i	n the total number of Rec	ipients disclosed			U	U	U	U	U	U		
				ACCRECATE	DISCLOSURE							
			Transferr of Volum								1	400540.04
Transfers of Value re Research & Development as defined 163516.84												103016.84