

Allegato 1 STANDARDISED DISCLOSURE TEMPLATE (MALTA)
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	Full name	HCPs: City of Principle Practice HCOs: City where registered POs: City where registered	Country of Principal Practice	Principle Practice Address	Unique country identifier OPTIONAL	Donations and Grants to HCOs and POs	Contribution to costs of Events			Fee for service and consultancy		TOTAL OPTIONAL
							Sponsorship agreements with HCOs, POs/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&accomodation relevant to the contract	
HCPs	INDIVIDUAL NAMED DISCLOSURE - one line per HCP (i.e. all transfer of value during a year for an individual HCP will be summed up; Itemization should be available for the individual Recipient or public authorities' consultation only, as appropriate)											
	OTHER NOT INCLUDED ABOVE - <small>where information cannot be disclosed to an individual Recipient or public authorities</small>											
	Aggregate amount attributable to transfers of value to such Recipients						501,14	850,06	200,00	0,00		0,00
	Number of Recipients in aggregate disclosure						1	1	1	0		Optional
% of the number of Recipients included in the aggregate disclosure in the total number, by category, of Recipients disclosed							100%	100%	100%	0%		
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; Itemization should be available for the individual Recipient or public authorities' consultation only, as appropriate)											
	OTHER NOT INCLUDED ABOVE - <small>where information cannot be disclosed to an individual Recipient or public authorities</small>											
	Aggregate amount attributable to transfers of value to such Recipients											
	Number of Recipients in aggregate disclosure						number	number	number	number		Optional
% of the number of Recipients included in the aggregate disclosure in the total number, by category, of Recipients disclosed							%	%	%	%		N/A
POs	INDIVIDUAL NAMED DISCLOSURE - one line per PO (i.e. all transfer of value during a year for an individual PO will be summed up; Itemization should be available for the individual Recipient or public authorities' consultation only, as appropriate)											
	OTHER NOT INCLUDED ABOVE - <small>where information cannot be disclosed to an individual Recipient or public authorities</small>											
	Aggregate amount attributable to transfers of value to such Recipients											
	Number of Recipients in aggregate disclosure						number	number	number	number		Optional
% of the number of Recipients included in the aggregate disclosure in the total number, by category, of Recipients disclosed							%	%	%	%		N/A
R&D	AGGREGATE DISCLOSURE											
	Transfers of Value Research & Development as defined in the Code											
												- OPTIONAL