

DATA DISCLOSURE FORM												
Date of publication: 30-06-2025												
Reporting Currency: CHF												
	Full name	PO: City	Country of Principal Practice	Principal Practice Address	Donations and Grants to POs	Contribution to costs of Events			Fee for service and consultancy			
						Sponsorship agreements with PO / third parties appointed by POs to manage an Event	Registration Fees	Travel & Accommodation	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accommodation relevant to the contract	TOTAL	
PO	INDIVIDUAL NAMED DISCLOSURE FOR PATIENT ORGANISATIONS											
	OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons											
PO-s	Aggregate amount attributable to transfers of value to such Recipients				5'000.00	N/A	N/A	N/A	N/A	N/A	N/A	
	Number of Recipients in aggregate disclosure				1	N/A	N/A	N/A	N/A	N/A	1	
	% of the number of Recipients included in the aggregate disclosure in the total number of Recipients disclosed				100%	N/A	N/A	N/A	N/A	N/A	100%	
TOTAL AMOUNT												
TOTAL	Total amount of Transfers of Value paid to PO as defined											5'000.00