		Schedule 2 - Slovakia *Article 2 - Section 2.03*												
		Full Name *(Art. 1.01)*	**HCPs:** City of Principal Practice HCO**s:** city where registered *(Art. 3)*	Country of Principal Practice *(Schedule 1)*	Principal Practice Address *(Art. 3)*	Unique country local identifyer *OPTIONAL* *(Art. 3)*	Donations and Grants to HCOs *(Art. 3.01.1.a)*	Contribution to costs of Events *(Art. 3.01.1.b & 3.01.2.a)* Sponsorship agreements with HCOs / third parties appointed by HCOs to manage an Event	Registration Fees	Travel & Accomodation	Fee for service and consultancy *(Art. 3.01.1.c & 3.01.2.c)* Fees	Related expenses agreed in the fee for service or consultancy contract	Transfers of Value re Research & Development as defined *(Art. 3.04)*	**TOTAL** *OPTIONAL*
INDIVIDUAL	**HCPs**	**INDIVIDUAL NAMED DISCLOSURE - one line per HCP** *(i.e. all transfers 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 - where information cannot be disclosed on an individual basis for legal reasons												
		Aggregate amount attributable to transfers of value to such Recipients *- Art. 3.2*					N/A	N/A	4 670 EUR	3 936 EUR	3 000 EUR	1 084 EUR		
		Number of Recipients *(named list, where appropriate) - Art. 3.2*					N/A	N/A	7	6	3	2		
		% of total transfers of value to individual HCPs *- Art. 3.2*					N/A	N/A	100%	100%	100%	100%		
	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)*												
		Detská fakultná nemocnica s poliklinikou Bratislava	Bratislava	Slovakia	Limbová 1, 833 40, Bratislava				200 EUR					
		Východoslovenský onkologický ústav, a.s.	Košice	Slovakia	Rastislavova 43, 041 91, Košice				600 EUR					
		OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons												
		Aggregate amount attributable to transfers of value to such Recipients *- Art. 3.2*												
		Number of Recipients *(named list, where appropriate) - Art. 3.2*												
		% of total transfers of value to individual HCOs *- Art. 3.2*												
AGGREGATE		*AGGREGATE DISCLOSURE*												
		N/A	N/A	N/A	N/A	N/A							0 EUR	