

TRANSFER OF VALUE DISCLOSURE SCHEME

Art. 36 ter. 3

Publication date:

Full name	HCP Municipality and postal code of the main practice / HCO Municipality and postal code of the main registered office Art 36. quater	Country of the main practice Art. 36 bis2	Address (street / number / box) of the main practice Art. 36 quater	Unique identification number OPTIONAL Art. 36 quater	Donations and grants Art. 36 quater 2la	Contributions to costs related to scientific events (Art. 36 quater 2Ib & 36 quater 2 II a)			Fees for services and consultancy (Art. quater 2 I c & 36 quater 2 II b)		TOTAL OPTIONAL
						Sponsorship agreements with HCOs / third parties appointed by HCOs to manage a scientific event	Registration fees	Travel and accommodation expenses	Fees	Related expenses included in the remuneration or agreed in the consultancy agreement, including travel and accommodation expenses related to the agreement	
INDIVIDUAL NAMED DISCLOSURE – (one line per HCP; all transfers of value made during the year to a given HCP will be aggregated – a detailed disclosure should only be made available to the concerned beneficiary or to the competent authorities upon request)											
Dr A					NA	NA	Annual amount	Annual amount	Annual amount	Annual amount	
Dr B					NA	NA	Annual amount	Annual amount	Annual amount	Annual amount	
etc					NA	NA	Annual amount	Annual amount	Annual amount	Annual amount	
OTHERS NOT INCLUDED ABOVE if the information cannot be disclosed on an individual basis for legal reasons											
Aggregate amount of transfers of value to these beneficiaries (Art. 36 quater 3)					NA	NA	Aggregate amount	Aggregate amount	Aggregate amount	Aggregate amount	Optional
Number of beneficiaries (named list if indicated) (Art. 36 quater §3)					NA	NA	number	number	number	number	Optional
% of the number of beneficiaries included in the aggregated disclosure out of the total number of beneficiaries disclosed (Art. 36 quater 3)					NA	NA	%	%	%	%	NA
INDIVIDUAL NAMED DISCLOSURE – (one line per HCO (all transfers of value made during the year to a given HCO will be aggregated – a detailed disclosure should only be made available to the concerned beneficiary or to the competent authorities upon request))											
La Société Luxembourgeoise de Neurologie (SLN)	L-2680 Luxembourg	Luxembourg	29, rue de Vianden		Annual amount	1800	Annual amount	Annual amount	Annual amount	Annual amount	1800
HCO 2					Annual amount	Annual amount	Annual amount	Annual amount	Annual amount	Annual amount	Optional
etc.					Annual amount	Annual amount	Annual amount	Annual amount	Annual amount	Annual amount	Optional
OTHERS NOT INCLUDED ABOVE if the information cannot be disclosed on an individual basis for legal reasons											
Aggregate amount of transfers of value to these beneficiaries (Art. 44quater3)					Aggregate amount	Aggregate amount	Aggregate amount	Aggregate amount	Aggregate amount	Aggregate amount	Optional
Number of beneficiaries (named list if indicated) (Art. 44 quater3)					number	number	number	number	number	number	Optional
% of beneficiaries included in the aggregated disclosure out of the total number of beneficiaries disclosed (Art. 44quater3)					%	%	%	%	%	%	NA
AGGREGATED DISCLOSURE											
Transfers of value related to research and development as defined in Art. 36 quater §5										TOTAL AMOUNT	Optional
INDIVIDUAL NAMED DISCLOSURE – (one line per PO (all transfers of value made during the year to a given PO will be aggregated – a detailed disclosure should only be made available to the concerned beneficiary or to the competent authorities upon request))											
Alzheimer Europe	L-1736 Senningerberg	Luxembourg	5 Heienhaff		Annual amount	37500	Annual amount	Annual amount	Annual amount	Annual amount	37500
					Annual amount	Annual amount	Annual amount	Annual amount	Annual amount	Annual amount	Optional
					Annual amount	Annual amount	Annual amount	Annual amount	Annual amount	Annual amount	Optional
OTHERS NOT INCLUDED ABOVE if the information cannot be disclosed on an individual basis for legal reasons											
Aggregate amount of transfers of value to these beneficiaries – Art. 36 quater §3					Aggregate amount	Aggregate amount	Aggregate amount	Aggregate amount	Aggregate amount	Aggregate amount	Optional
Number of beneficiaries (named list if indicated) – Art. 36 quater §3					number	number	number	number	number	number	Optional
% of beneficiaries included in the aggregated disclosure out of the total number of beneficiaries disclosed – Art. 36 quater §3					%	%	%	%	%	%	NA

PSS

HCO

R&D

PO