							TEMPLATE					
											n Date :30/06/2023	
		L Practice HCOst city		business/ registered	/ registered	Contribution in the cost of events			Fees for co			
						Donations & Grants to HCOs	Sponsorship agreements with HCOs / third parties appointed by HCOs to manage an Event	Registration Fees	Travel & Accommodation	Fees	Related costs agreed in the fee for the services or the consultancy contract, including travel and subsistence costs related to the contract	TOTAL
		IND Fotis TOPOUZIS	IVIDUAL NAMED DISCL	OSURE - one line per HC Greece	CP (i.e. all transfers of value of AHEPA Hospital, St. Kiriakidis 1, 54636 54636 Thessaloniki Greece	luring a year for an ind N/A	ividual HCP will be summed up (d	detailed description of eac	h transfer must be availabl	e to the individual Recip 1.900,00	ient or public authorities where required) 0	1.900,00
	HCPs	OTHERS NOT INCLUDED ABOVE - in case information may not be disclosed for legal reasons										
		Aggregate amount attributable to transfers of value to such Recipients				N/A	N/A	0	0	0	0	0
		Number of Recipients in aggregate disclosure			N/A	N/A						
		% of the number of Recipient disclosed	ts included in the aggregate disclosure in the total number of Recipients			N/A	N/A					N/A

TEMPLATE												
		1		1		1					Publicatio	n Date :30/06/2023
		Full Name HCPs: City of Principal Practice HCOs: city where registered Country where the place of business/ Address of place of business/ registered   Full Name HCPs: City of Principal Practice HCOs: city where registered Country where the place of business/ Address of place of business/ registered				Contribution in the cost of events			Fees for co			
						Donations & Grants to HCOs	Sponsorship agreements with HCOs / third parties appointed by HCOs to manage an Event	Registration Fees	Travel & Accommodation	Fees	Related costs agreed in the fee for the services or the consultancy contract, including travel and subsistence costs related to the contract	TOTAL
INC		NAMES OF HCOs FOR DISCLOSURE - one line per HCO i.e. all transfers of value during a year to each HCO will be summed up (detailed description of each transfer must be available to the individual Recipient or public authorities where required)										
		OTHERS NOT INCLUDED ABOVE - in case information may not be disclosed for legal reasons										
	HCOS	Aggregate amount attributable to transfers of value to such Recipients			0	0	0	0	0	0	0	
	т	Number of Recipients in aggregate disclosure										
		% of the number of Recipients included in the aggregate disclosure in the total number of Recipients disclosed										N/A

FEES FOR RESEARCH & DEVELOPMENT

