EFPIA

Reporting Year : 2022

Reporting Currency : EUR



|  | EFPIA REPORT  |                                       |                         |   |                                     |                            |   |                      | Date of Publication : 2024-06-12 V02 |                 |   |      |  |
|--|---|---------------------------------------|-------------------------|---|-------------------------------------|----------------------------|---|----------------------|--------------------------------------|-----------------|---|------|--|
|  | Full Name   | HCPs: City of<br>Principal            | Country of<br>Principal | Principal Practice<br>Address                       | Unique Country<br>Identifier        | Donations and<br>Grants to | Contribution to costs of Ever   |                      | Events                               | Fee for service | Fee for service and consultancy   |      |  |
| H C P  |   | Practice                              | Practice                | Autress   |                                     | HCOs                       | Sponsorship<br>agreements<br>with<br>HCOs / third<br>parties<br>appointed by<br>HCOs to<br>manage an<br>Event | Registration<br>Fees | Travel &<br>Accommodation            | Fees            | Related<br>expenses<br>agreed in the fee<br>for service or<br>consultancy<br>contract,<br>including travel<br>&<br>accommodation<br>relevant to the<br>contract |      |  |
| IN   | IDIVIDUAL NAMED DISCLOSURE - one line per HCP (       | (i.e. all transfers of value during a | year for an ind         | ividual HCP will be summed up: itemization should b | e available for the individual Reci | pient or public autho      | orities' consultation of  | nly, as appropriate  |                                      | 1               |   |      |  |
| OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons |   |                                       |                         |   |                                     |                            |   |                      |                                      |                 |   |      |  |
| Ag   | ggregate amount attributable to transfers of value to | such Recipients                       |                         |   |                                     | N/A                        | N/A   | 0.00                 | 0.00                                 | 0.00            | 0.00  | 0.00 |  |
|  |   |                                       |                         |   |                                     |                            |   |                      |                                      |                 |   |      |  |
| Nu   | umber of Recipients in aggregate disclosure           |                                       |                         |   |                                     | N/A                        | N/A   | 0                    | 0                                    | 0               | 0   | N/A  |  |
| %  | number of Recipients in the aggregate disclosure in   | the total number of Recipients Di     | sclosed                 |   |                                     | N/A                        | N/A   | 0.00                 | 0.00                                 | 0.00            | 0.00  | N/A  |  |



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|---|--|-------------------------|---|---|----------------------------|---|----------------------|--------------------------------------|--------|---|-------|--|
| Full Name   | HCOs: City<br>where                          | Country of<br>Principal | Principal Practice<br>Address           | Unique Country<br>Identifier                                | Donations and<br>Grants to | Contribution to costs of Ev   |                      | vents Fee for serv                   |        | and consultancy   | Total |  |
| 4<br>C<br>D   | where<br>registered                          | Practice                | Address                                 | reentiner   | HCOS                       | Sponsorship<br>agreements<br>with<br>HCOs / third<br>parties<br>appointed by<br>HCOs to<br>manage an<br>Event | Registration<br>Fees | Travel &<br>Accommodation            | Fees   | Related<br>expenses<br>agreed in the fee<br>for service or<br>consultancy<br>contract,<br>including travel<br>&<br>accommodation<br>relevant to the<br>contract |       |  |
| NDIVIDUAL NAMED DISCLOSURE - one line per HCC<br>Kauno klinikinė ligoninė | ) (i.e. all transfers of value during KAUNAS | g a year for an ind     | dividual HCO will be summed up: itemize | ntion should be available for the individual R<br>302583800 | ecipient or public auth    |   | only, as appropriate |                                      | 290.00 | 0.00  | 290.0 |  |
| Vilniaus Universiteto ligoninė Santaros klinikos,                         | VILNIUS                                      | LT                      | Santariškių g. 2, Vilnius               | 124364561   | 0.00                       |   | 0.00                 |                                      | 290.00 | 0.00  | 290.0 |  |
| Všį   |  |                         |   |   |                            |   |                      |                                      |        |   |       |  |
| THER, NOT INCLUDED ABOVE - where information                              | cannot be disclosed on an indiv              | idual basis for le      | gal reasons                             |   |                            |   |                      |                                      |        |   |       |  |
| ggregate amount attributable to transfers of value to suc                 | ch Recipients                                |                         |   |   | 0.00                       | 0.00  | 0.00                 | 0.00                                 | 0.00   | 0.00  | 0.0   |  |
|   |  |                         |   |   |                            |   |                      |                                      |        |   |       |  |
| lumber of Recipients in aggregate disclosure                              |  |                         |   |   | 0                          | 0   | 0                    | 0                                    | 0      | 0   | N     |  |
| 6 number of Recipients in the aggregate disclosure i                      | n the total number of Recipients             | Disclosed               |   |   | 0.00                       | 0.00  | 0.00                 | 0.00                                 | 0.00   | 0.00  | N     |  |

| R<br>&<br>D | AGGREGATE DISCLOSURE                                       | Total(R&D) |
|-------------|--|------------|
|             | Transfers of Value for Research and Development as defined | 167,973.27 |

| GRAND TOTAL |            |
|-------------|------------|
|             | 168,553.27 |