	Gilead Sciences - EFPIA 2016 Report - Croatia											
Date of publication:30/06/2017												
Full Name (Art 19.1.)	HCPs: City of Principal Practice;city where registered (Art. 20.6)	Principal Country of Recipient's Principal Practice	Principal Unique country Practice Address identifier (OPTIONAL)  (Art. 20.6.) (Art. 20.6.)	Donations to	Contribution to costs of Events (Art. 20.1.A.(ii) and 20.1.B.(i).)			Fees for services (Art. 20.1.A.(iii) and 20.1.B.(ii))			TOTAL	
	(Art. 20.6. related to Art. 2.1.)		Healthcare Organisations (Art. 20.1.A.(i).)	Sponsorship agreements with HCOs / third parties appointed by HCOs to manage Events	Registration Fees	Travel & Accommodation	Fees	Related expenses agreed in the fee for service or consultancy contract, including contract relevant travel & accomm.	OP	OPTIONAL		
INDIVIDUAL NAME	INDIVIDUAL NAMED DISCLOSURE - one line per HCP (i.e. all Transfer 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, NO	OT INCLUDED ABOVE:	where information	n cannot be disclo	sed on an individu	ual basis for lega	l reasons			
Aggregate amount	Aggregate amount attributable to Transfers of Value to such Recipients - Art. 20.2.								37.088,93	8.161,29		45.250,22
Number of Recipients in aggregate disclosure – Art. 20.2.									3	3		3
	of Recipients inclu sclosed - Art. 20.2		ate disclosure in	the total number					100,00	100,00		

Full Name (Art 19.1.)	HCPs: City of Principal Practice;city where registered (Art. 20.6)	Practice	Principal Practice Address (Art. 20.6.)	Unique country identifier (OPTIONAL) (Art. 20.6.)	Donations to	Contribution to costs of Events (Art. 20.1.A.(ii) and 20.1.B.(i).)				rvices (Art. nd 20.1.B.(ii))		TOTAL
		(Art. 20.6. related to Art. 2.1.)			Healthcare Organisations (Art. 20.1.A.(i).)	Sponsorship agreements with HCOs / third parties appointed by HCOs to manage Events	Registration Fees	Travel & Accommodation	Fees	Related expenses agreed in the fee for service or consultancy contract, including contract relevant travel & accomm.		OPTIONAL
INDIVIDUAL NAMEL	INDIVIDUAL NAMED DISCLOSURE - one line per HCO (i.e. all Transfer 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)											
"Klinika za infektivne bolesti ""Fran Mihaljević"""	Zagreb	Croatia	Mirogojska 8		252.005,81							252.005,81
OTHER, NOT INCLUDED ABOVE: where information cannot be disclosed on an individual basis for legal reasons												
Aggregate amount	Aggregate amount attributable to Transfers of Value to such Recipients - Art. 20.2.											
Number of Recipie	Number of Recipients in aggregate disclosure - Art. 20.2.											
	% of the number of Recipients included in the aggregate disclosure in the total number of Recipients disclosed – Art. 20.2.											

	AGGREGATE DISCLOSURE		
R & D	Transfers of Value re. Research & Development as defined - Art. 21.2.2.	707.037,21	297.256,03