					GILEAD SC	IENCES - 201	8 Report					
										Date of	publicatio	n:18/06/201
Full Name (Art 1.01)	HCPs: City of Principal Practice HCOs: city where registered (Art 3)	Country of Principal Practice (Schedule 1)	Principal Practice Address (Art 3)	Unique country identifier 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)				e and consultancy c & 3.01.2.c)		TOTAL
						Sponsorship agreements with HCOs/third parties appointed by HCOs to manage an Event	Registration Fees	Travel & Accommodation	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accommodation relevant to the contract	0	OPTIONAL
INDIVIDUAL NAM	ED DISCLOSURE-one	line per HCP(i.e.	all transfers of	value during a yea		al HCP will be sum nly, as appropriat		n should be availa	ble for the Indiv	idual Recipient or	public authoritie	s' consultation
OLAFSSON, SIGURDUR	REYKJAVIK	Iceland	Nordurmyri					12.845,30 kr.				12.845,30 k
			OTHER, N	OT INCLUDED ABOVE	-where information	cannot be disclos	ed on an individu	al basis for legal	reasons			
Aggregate amount attributable to transfers of value to such Recipients - Art 3.02												
Number of Recipients in aggregate disclosure - Art 3.02												
% of the number of Recipients included in the aggregate disclosure in the total number of Recipients disclosed - Art 3.02												

Full Name (Art 1.01)	HCPs: City of Principal Practice HCOs: city where registered (Art 3)	Country of Principal Practice (Schedule 1)	Principal Practice Address (Art 3)	Unique country identifier 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)			Fee for service and consultancy (Art 3.01.1 c & 3.01.2.c)			TOTAL
						Sponsorship agreements with HCOS/third parties appointed by HCOs to manage an Event	Registration Fees	Travel & Accommodation	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accommodation relevant to the contract		OPTIONAL
INDIVIDUAL NAM	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)											
LANDSPITALI UNIVERSITY HOSPITAL	REYKJAVIK	Iceland	Nordurmyri							196.001,36 kr.		196.001,36 kr.
SAA VOGUR HOSPITAL	Reykjavik	Iceland	Storhöfai 45							113.315,52 kr.		113.315,52 kr.
С	OTHER, NOT INCLUDED ABOVE-where information cannot be disclosed on an individual basis for legal reasons											
s Aggregate amount	Aggregate amount attributable to transfers of value to such Recipients - Art 3.02											
Number of Recipie	Number of Recipients in aggregate disclosure - Art 3.02											
	% of the number of Recipients included in the aggregate disclosure in the total number of Recipients disclosed - Art 3.02											

	AGGREGATE DISCLOSURE		
R & D	Transfers of Value re Research & Development as defined - Article 3.04 and schedule 1	23.898.622,66 kr.	24.220.784,84 kr.