

Report on disclosure of information on payments made to or for the benefit of healthcare professionals and healthcare organizations by Representative Office of Mundipharma Gesellschaft m.b.H. (Austria), Moscow year of 2015													Date of publication: June 27, 2016	
Template	Full Name (Sub-clause 7.1.1)	HCPs: inhabited localities of Principal Practice HCOs: inhabited localities where registered (Clause 7.3)	Country of Principal Practice	Principal Practice Address (Clause 7.3)	Unique country local identifier OPTIONAL (Clause 7.3)	Donations and Grants to HCOs (Clause 7.3.2)	Contribution to costs of Events (Sub-clause 7.3.2)			Fee for service and consultancy (Sub-clause 7.3.2 & 7.3.3)		TOTAL OPTIONAL		
							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 and accommodation relevant to the contract			
HCPs	INDIVIDUAL NAMED DISCLOSURE – one line per HCP (i.e. all transfers 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)													
	disclosure impossible	disclosure impossible	disclosure impossible	disclosure impossible	disclosure impossible	N/A	N/A	disclosure impossible	disclosure impossible	disclosure impossible	disclosure impossible	N/A	disclosure impossible	
	disclosure impossible	disclosure impossible	disclosure impossible	disclosure impossible	disclosure impossible	N/A	N/A	disclosure impossible	disclosure impossible	disclosure impossible	disclosure impossible	N/A	disclosure impossible	
	disclosure impossible	disclosure impossible	disclosure impossible	disclosure impossible	disclosure impossible	N/A	N/A	disclosure impossible	disclosure impossible	disclosure impossible	disclosure impossible	N/A	disclosure impossible	
	OTHER, NOT INCLUDED ABOVE – where information cannot be disclosed on an individual basis for legal reasons													
	Aggregate amount attributable to transfers of value to such Recipients – Sub-clause 7.3.4						N/A	N/A	2373354,90	2478606,65	1043970,00	250823,00		6146754,55
	Number of Recipients in aggregate disclosure - Sub-clause 7.3.4						N/A	N/A	26	87	16	2		131
	% of the number of Recipients included in the aggregate disclosure in the total number of Recipients disclosed - Sub-clause 7.3.4						N/A	N/A	100,00%	100,00%	100,00%	100,00%		N/A
	INDIVIDUAL NAMED DISCLOSURE – one line per HCO (i.e. all transfers 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)													
		Charity Fund of palliative care "TOGETHER WE CAN"	Moscow	Russian Federation	127055 Russia Moscow, per. Uglovoy, bld. 2	7715043870	0,00	0,00	80000,00	0,00	0,00	0,00		80000,00
	Non-Commercial Partnership "Management of "National Congress of Therapists"	Moscow	Russian Federation	117452 Russia, Moscow, Chongarsky boulevard, bld.9	7726533604	0,00	675615,00	0,00	0,00	0,00	0,00		675615,00	
	All-Russian public organization "Russian Society of Clinical Oncology" "	Moscow	Russian Federation	127051 Russia, Moscow, Trubnaya street, bld.25, section1	7704278213	0,00	714000,00	0,00	0,00	0,00	0,00		714000,00	
	OGBUZ "Smolensk Regional Oncology Center"	Smolensk	Russian Federation	214000 Russia, Smolensk, M.Zhukova street, 19	6731020412	0,00	0,00	70000,00	0,00	0,00	0,00		70000,00	
	Non-Commercial Partnership "Association of interdisciplinary Medicine"	Moscow	Russian Federation	115682 Russia, Moscow, Shipilovskaya street, bld.64, section 1, office 147	7724300788	0,00	2150000,00	0,00	0,00	0,00	0,00		2150000,00	
	All-Russia Public Advocacy "Medicine for Quality of Life"	Moscow	Russian Federation	103055 Russia, Moscow, Per. Uglovoy, bld.2 section 1	7707308547	0,00	2311675,50	0,00	0,00	0,00	0,00		2311675,50	
	GAUZ "GKB after N.I.Pirogov" of Orenburg	Orenburg	Russian Federation	460048 Russia, Orenburgskaya region, Orenburg, Prospect Pobedy, bld.140, section B	5609016158	0,00	0,00	25000,00	0,00	0,00	0,00		25000,00	
	Rostov regional public organization "Association of Gastroenterology Don"	Rostov-on-Don	Russian Federation	344091, Russia, Rostov-on-Don, pr. Communistichesky, 39	6168076145	0,00	0,00	60000,00	0,00	0,00	0,00		60000,00	
	SPB GKUZ Hospice №1	Saint Petersburg	Russian Federation	197229 Russia, Saint Petersburg, Lakhta, Lakhtinsky pr 98	7814309023	57515,00	0,00	0,00	0,00	0,00	0,00		57515,00	
OTHER, NOT INCLUDED ABOVE – where information cannot be disclosed on an individual basis for legal reasons														
Aggregate amount attributable to transfers of value to such Recipients – Sub-clause 7.3.4						Aggregate HCOs	Aggregate HCOs	Aggregate HCOs	Aggregate HCOs	Aggregate HCOs	Aggregate HCOs		OPTIONAL	
Number of Recipients in aggregate disclosure - Sub-clause 7.3.4						N/A	N/A	N/A	N/A	N/A	N/A		OPTIONAL	
% of the number of Recipients included in the aggregate disclosure in the total number of Recipients disclosed - Sub-clause 7.3.4						N/A	N/A	N/A	N/A	N/A	N/A		N/A	
R&D	AGGREGATE DISCLOSURE													
	Transfers of value re Research & Development as defined (Sub-clause 7.3.6.)											0	0	