COMPANY NAME: YEAR: COUNTRY: DATE OF SUBMISSION TO CENTRAL PLATFORM: [insert date] METHODOLOGICAL NOTE (H) (Clause 28.6): [insert link here]

								DISCLOSURE OF PAYMENT	rs to Healthcar			HER RELEVANT DECIS DE OF PRACTICE (Cla		ns) AND HEALTHCA	RE ORGANISATION	IS (HCOs)							Date of publication:	
	Full Name				HCPs/ORDMs: City of Principal Practice HCOs: city where registered (Clause 28) Country of Principal Practice Practice (Clause 28)		ipal Principal Practice Address (Clause 28)			ddress		Unique country local identifier OPTIONAL (Note 3)	Collaborative Working	Donations and Grants to HCOs (Clauses 23 & 28)	Contribution to costs of Events (Cla uses 10 & 28)			Contracted Services (Clauses 24 & 28)		Blank Column (Clause X)		TOTAL		
											(Clause 28)		(which includes Joint Working) (Clauses 20 & 28)		Sponsorship agreements with HCOs / third party organisations appointed by HCOs to manage an Event (Note M)	Registration Fees	Travel & Accommodation	Fees	Expenses	Blank C	olumn Blank Column se X) (Clause X)	1		
	Title	First Name	Initial Last	Name Speciality	Role	HCPs/ORDMs: City of Principal Practice HCOs: where registered		Institution Name Location	Address Line 1	L Address Line 2	2 Post Code	Email	Local Register ID or Third Party Database ID										, ,	
							·	INDIVID	UAL NAMED DISCLO	SURE - one line per	er HCP/ORDM (i.e.	all transfers of value du	ring a year for an individu	ual HCP will be summed	d up: itemization shoul	d be available for the ii	ndividual Recipient or public authoriti	es' consultation only, as approp	riate)					
Š	Professor	David Paresh	Wright			Leicester London	UK	University of Northwick Park	University Road Watford Road		LE1 7RH HA1 3UJ	d.j.wright@leicester.ac paresh_parmar1@vah		N/A N/A	N/A N/A	N/A N/A	N/A N/A			3550 450	185.2			3735.2
ORD ORD	Mr	Nigel	Parmar Gooding			Cambridge	UK	Addenbrooks	Hills Rd		CB2 OQQ	n.gooding@nhs.net		N/A	N/A	N/A	N/A	237.5		450				450 237.5
and	Mr	Chris	Bonsell			Leeds	UK	Kirkstall Lane	Leeds		LS6 3DS	chris.bonsell@nhs.net		N/A	N/A	N/A	N/A			500				500
\$	Aggregate amo	ount attributable to	transfers of value to such R	Recipients - Template & C	lauce 28							OTHER, NOT INCL	.UDED ABOVE - where in	formation cannot be di: N/A	sclosed on an individua N/A	l basis for legal reason N/A	N/A			1900				1800
	Aggregate amount attributable to transfers of value to such Recipients - Template & Clause 28 Number of Recipients in aggregate disclosure - Template & Clause 28													N/A N/A	N/A	N/A	N/A N/A	0	0	1	0			1
	Number of Recipients disclosed in aggregate as a % of all Recipients (individual & aggregate as a % of all Recipients (individual & aggregate disclosures) - Clause 28																20%							
									Leedale House,	T		T												
	(Clause 28)							AIMp Limited	Railway Court	Doncaster	DN4 5FB	admin@aimp.co.uk					1614							1614
						PHOENIX Numark Healthcare Distribution	Rivington Road, Whitehouse Industrial Estate	Runcorn	WA7 3DJ	customerservices@nu mark-central.co.uk								9000				9000		
							Distribution PHOENIX PSUK Healthcare Distribution	Rivington Road, Whitehouse Industrial Estate	Runcorn	WA7 3DJ	enquiries@psuk.co.uk					5695			6417.5				12112.5	
E S						MORPh Consultancy	Country House, St Mary's Stret		WR1 1HB	abble@morphconsulta ncy.co.uk					6000							6000		
							PCPA (Pharmacomm Ltd)	Send Hill Studio	os Woking	GU23 7HT	melisa@pharmacomm co.uk	-				21,000							21000	
							Neonatal & Paediatric UK Clinical	c/o profile productions	Brentford	TW89JJ	paul.elbourn@profilep oductions.co.uk	-				14,250							14250	
								UK Clinical	PO Box 10916	Wigston	LE18 9HY	admin@ukcpa.com					2800	<u> </u>						2800
								I morthocy			OTHER, NOT	INCLUDED ABOVE - whe	ere information cannot be	disclosed on an individ	lual basis for legal reas	ons Clause 1.8 supple	mentary information							
	Aggregate amount attributable to transfers of value to such Recipients - Templote & Clouse 28.5														N/A									
	Number of Rec	cipients in aggregate cipients disclosed in	disclosure - Template & Clasgregate as a % of all Reci	.iause 28.5 ipients (individual & aggre	egate disclosures)) - Clause 28.5								N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A			N/A N/A
														AGGREGATE DISCLOSU	RE									
Research and Development										Trai	ansfers of Value re	:: Research & Developm	ent as defined Clause 1.7									0		N/A

20	21 ABPI Code Disclosure Template (updated May 2021)									
Brackets belo	w depict those which appear on the spreadsheet including format									
NOTE 2:	'Clause' refers to the relevant Clause of the 2021 ABPI Code of Practice for the Pharmaceutical Industry									
NOTE 3: (NOTE 3)	Unique ID would be an identifier from either Wilmington Healthcare or OneKey otherwise this should be left blank									
NOTE 4:	Payments to health professionals (HCPs) as defined in Clause 1.9, healthcare organisations (HCOs) as defined in Clause 1.8 and other relevant decision makers (ORDMs) as defined in Clause 1.13, has to be disclosed									
NOTE A: (A)	Data relates to the column heading ie registration fees									
NOTE B: (B)	Data relates to the column heading ie travel and accommodation									
NOTE C: (C)	Data relates to column heading ie contracted services									
NOTE D: (D)	Data relates to the column heading ie related expenses agreed in the contracted services contract or agreemen									
NOTE E: (E)	Total £ disclosed as aggregate									
NOTE F: (F)	Total number of individuals disclosing in aggregate. WARNING: this is not necessarily a sum of columns V,W,X and Y as individuals might appear in more than one category i.e. receive fees and expenses. The methodological note must make clear the number of individuals who have agreed to some payments being disclosed individually and some in aggregate									
NOTE G: (G)	The link can be included here and/or in the methodological note									
NOTE H: (H)	The methodological note must make clear the number of individuals who have agreed to some payments being disclosed individually and some in aggregate									
NOTE J: (J)	Total £ for that individual									
NOTE K: (K)	Total £ for that HCO across all activities except R&D									
NOTE L: (L)	Total percentage of individuals disclosing in aggregate									
NОТЕ M: (M)	Sponsorship to a healthcare organisation or a third party organisation appointed by a healthcare organisation which is not related to events/meetings and which cannot be disclosed elsewhere on the template (i.e. is not considered to be a donation or grant or contracted service or related to collaborative working) should be included in this column and an explanation given in the methodological note									

required
optional
to facilitate the process but not to be published on database