ABPI CODE OF PRACTICE 2021 OPTIONAL DISCLOSURE TEMPLATE FOR PATIENT ORGANISATIONS (POs) AND THE PUBLIC

Companies must include a note of methodologies used in preparing the disclosures **LAST UPDATED 16052023** 1. Annual Disclosure of Support Provided to Patient Organisations and Contracted Services Provided by Individuals Representing Patients Organisations **Patient Organisation Optional Indication of Patient** Name **Types of the Support** Non-monetary Fees for Services/ **Monetary Value of Financial** (add additional table Description of Support ¹ **Organisation's Total Income** Country or Services Provided **Support and of Invoiced costs** Benefit for PO² **Expenses** and/or the Company's Support as for each Patient Organisation) a Percentage Grants add a line for each Grant **Financial Support Sponsorship of Meetings** Not applicable add a line for each sponsorship Not applicable **Other Sponsorships** add a line for each sponsorship **Donations** Non-financial support add a line for each donation **Contracted services Fees** (Fees and expenses should be disclosed Not applicable Not applicable separately) Out of pocket/ expenses 2. Annual Disclosure of Contracted Services Provide by The Public **Number of Members of Total Fees for** the Public / Journalists **Description of Support** ¹ **Contracted Services Provided** Country **Services/Expenses Contracted Contracted services** Fees (Fees and expenses should be disclosed separately) add a line for each different service Out of pocket expenses provided Members of the 10 minute Online questionnaire for patients being £3.50 per person for fees 75 Market Research UK **Public** treated with HRT £262.50 Not applicable Not applicable Not applicable **Contracted services** Fees (Fees and expenses should be disclosed separately) **Patients** add a line for each different service Out of pocket expenses provided **Contracted services** Fees (Fees and expenses should be disclosed separately) **Journalists** add a line for each different service Out of pocket expenses provided

- 1. Add a clear description which is sufficiently complete to enable the reader to understand the nature of each support or services provided
- 2. For example, employee hours or company's facilities offered to support a Patient Organisation activity

ST UPDATED 251120		Compar	nies must	tinclud	e a note	e of method	dologie	es used in	preparing	the disclosures	
	Patient Organisation Name	Country	Types of the Support or Services Provided								
			Financial Support			Non-financial support	Contracted services (Fees and expenses should be disclosed separately)				
			Grants add a line for each Grant	Sponsorship of Meetings add a line for each sponsorship	Other Sponsorships add a line for each sponsorship	Donations add a line for each donation	Fees	Out of pocket/ expenses	Non-monetary Benefit for PO ²	Optional Indication of Patient Organisation's Total Income and/or the Company's Support as a Percentage	Description of Services
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rga ona Pat isa											
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add add											
	Description of S	Services ¹		Add addition	onal lines as required		N/A	N/A	N/A	N/A	
mbers of the	<u> </u>	Description of Services ¹		Add additional lines as required				N/A	N/A	N/A	
Public		tributable to transfers of value to such Recipients				N/A	•		N/A	N/A	
	Number of Recipients in aggregate disclosure								N/A	N/A	N/A
Patients	Description of S		onal lines as required		N/A	N/A	N/A	N/A			
	Description of S	Add additional lines as required				N/A	N/A	N/A	N/A		
	Aggregate amount attributable to transfers of value to such Recipients								N/A	N/A	N/A
	Number of Recipients in aggregate disclosure								N/A	N/A	N/A
Journalists	Description of S	Add additional lines as required				N/A	N/A	N/A	N/A		
	Description of Services 1			Add addition	onal lines as required		N/A	N/A	N/A	N/A	
	Aggregate amount attributable to transfers of value to such Recipients								N/A	N/A	N/A
	Number of Recipients in aggregate disclosure							N/A	N/A	N/A	