

INDIVIDUAL NAMED DISCLOSURE - per HCP/HCO/PCO

Full name HCP/HCO/PCO	City of principal practice	Country of pp	Principal practice address	IČO (HCO/PCO)/ number in the medical chamber (HCP)	Donations and grants to HCO	Sponsorship to HCO/PCO	Registr. Fees	Travel + accommodation costs	Fees	Related expenses agreed in the fee	Research payments	Date of payment
Guarant International Spol. S.R.O.	Prague	Czech Republic	Českomoravská 3510/19, 190 00	001TE00000HQufyVAD		741,860.52						07/07/2025
Guarant International Spol. S.R.O.	Prague	Czech Republic	Českomoravská 3510/19, 190 00	001TE00000HQufyVAD		273,623.84						13/10/2025