**Transparency disclosure**

For any request related to the 2017 Transparency disclosure (on 2016 data), please fill and sign this form and send it back to : transparency.poland@ipsen.com

*\* Mandatory fields*

|  |
| --- |
| **Your information** |

Name\* :

First name\* :

Address of main place of business\* : Cliquez ici pour taper du texte.

ZIP Code, city, country\* : Cliquez ici pour taper du texte.

ID number as from report: Cliquez ici pour taper du texte.

|  |
| --- |
| **Your request** |

[ ]  General question

[ ]  Personal data rectification (address…)

[ ]  Amount rectification

[ ]  Disclosure consent change

Request details\* :

|  |
| --- |
|   |

To ease your request management,

* If you have receipts linked to your request, please attach a copy to this letter
* If you have a identifier of a contract, invoice etc. please specify it here : Cliquez ici pour taper du texte.