

#### **INSTRUCTIONS:**

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#### 1. Identifying information.

Each author should submit a separate form. Provide complete information and double-check the manuscript number. If you are NOT the corresponding author please insert his or her name.

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Effective Date: | 30-August-2011

Surname:

**Section 1. Identifying Information.** 

Given Name:

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Are you the corr	responding auth	or? X Yes	□ No		Format example: 07-Augu	ıst-2008
Manuscript Title:	Overvægtige gr	avide og kom	nplikationer i relatio	on til graviditet og fødse	el	
Manuscript Identi	fying Number	(if you knov	v it):			
Section 2. Informa	ation about t	he suppor	t of the work ı	ınder consideratio	on for publication.	
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Type of Relation (in alphabetical o	-   NO	Money Paid to You	Money to Your institution	Entity	Comments	
Board membership	$\boxtimes$					Del×
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Consultancy	$\boxtimes$					Del×
						Add +
Employment						Del ×
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Expert testimony						Del ×
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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your institution	Entity	Comments	
Gifts	$\boxtimes$					Del ×
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Grants/grants pending	$\boxtimes$					Del ×
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Honoraria	$\boxtimes$					Del ×
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Payment for manuscript preparation	$\boxtimes$					Del×
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Patents (planned, pending or issued)	$\boxtimes$					Del×
						Add +
Royalties	$\boxtimes$					Del ×
						Add +
Payment for development of educational presentations including service on speakers' bureaus	$\boxtimes$					Del ×
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Stock/stock options	$\boxtimes$					Del ×
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Travel/accommodations expenses covered or reimbursed	$\boxtimes$					Del×
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Other (err on the side of full disclosure)	$\boxtimes$					Del ×
						Add +



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Given Name: (or first)	Mette	Surname: (or last)	Tanvig	Effective Date:	29-August-2011
Are you the	corresponding author? [	Yes 🛛 N	No	Format exam	ple: 07-August-2008
Corresponding	g author's name: Christ	ina Anne Vinte	r		
Manuscript T	itle: Overvægtige gravid	e og komplikati	oner i relation til graviditet og fø	dsel	
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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your institution	Entity	Comments	
Board membership	$\boxtimes$					Del×
						Add +
Consultancy	$\boxtimes$					Del ×
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Employment	$\boxtimes$					Del×
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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your institution	Entity	Comments	
Expert testimony	$\boxtimes$					Del ×
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Gifts	$\boxtimes$					Del ×
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Payment for development of educational presentations including service on speakers' bureaus	$\boxtimes$					Del ×
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Stock/stock options	$\boxtimes$					Del ×
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Travel/accommodations expenses covered or reimbursed	$\boxtimes$					Del ×
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Other (err on the side of full disclosure)	$\boxtimes$					Del ×
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Surname:

**Section 1. Identifying Information.** 

Given Name:

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**Employment** 

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Corresponding	author's n	ame: Ch	ristina Vinte	er			
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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your institution	Entity	Comments	
Expert testimony	$\boxtimes$					Del×
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Gifts	$\boxtimes$					Del ×
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Grants/grants pending	$\boxtimes$					Del ×
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Honoraria	$\boxtimes$					Del ×
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Payment for manuscript preparation	$\boxtimes$					Del×
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Patents (planned, pending or issued)	$\boxtimes$					Del ×
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Royalties	$\boxtimes$					Del ×
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Payment for development of educational presentations including service on speakers' bureaus	$\boxtimes$					Del ×
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Stock/stock options	$\boxtimes$					Del ×
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Travel/accommodations expenses covered or reimbursed	$\boxtimes$					Del×
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Other (err on the side of full disclosure)	$\boxtimes$					Del ×
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Damm 3



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Given Name: (or first)	Klara	Surname: (or last)	Naver	Ef	fective Date:	25-August-2011
` ,	e corresponding aut		No		Format exam	ple: 07-August-2008
•	1					
Corresponding	g author's name:	Christina Vinter				
Manuscript T	itle: Overvægtige g	gravide og komplikat	ioner i relation til gr	aviditet og fødsel		
Manuscript Id	lentifying Number	r (if you know it):				
Section 2. Info	ormation about	the support of t	he work under	consideration f	or publication	on.
		ime receive paymen poard, study design,	* *	, ,		ork (including but not
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Gifts	$\boxtimes$					Del ×
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Please report any personal, professional, political, institutional, religious, or other associations that a reasonable reader would want to know about in relation to the submitted work.

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**Section 1. Identifying Information.** 

Board membership

Consultancy

**Employment** 

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Given Name: (or first)	Kirsten Riis		Surname: (or last)	Andreaser	ı	Effective Date:	26-August-201	1
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Corresponding	g author's n	ame: Christ	ina Vinter					
Manuscript T	itle: Overvæ	egtige gravide	9					
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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your institution	Entity	Comments	
Expert testimony	$\boxtimes$					Del×
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Gifts	$\boxtimes$					Del ×
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Grants/grants pending	$\boxtimes$					Del ×
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Payment for manuscript preparation	$\boxtimes$					Del×
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Patents (planned, pending or issued)	$\boxtimes$					Del ×
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Royalties	$\boxtimes$					Del ×
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Payment for development of educational presentations including service on speakers' bureaus	$\boxtimes$					Del ×
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Stock/stock options	$\boxtimes$					Del ×
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Travel/accommodations expenses covered or reimbursed	$\boxtimes$					Del×
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Other (err on the side of full disclosure)	$\boxtimes$					Del ×
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Do your children or your spouse or partner have financial relationships with entities that have an interest in the content of the
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No other relationships/conditions/circumstances that present potential conflict of interest
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that a reasonable reader would want to know about in relation to the submitted work?	
No relevant nonfinancial relationships/conditions/circumstances to report.	
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Torvin Andersen

Effective Date: 26-August-2011

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Surname:

**Section 1. Identifying Information.** 

Lise Lotte

Given Name:

Consultancy

**Employment** 

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(or first)	Lise Lotte	(or la	st)   Torvin Ai	ndersen		
Are you the	corresponding auth	nor?  Yes	⊠ No		Format example: 07-August-	-2008
Corresponding	author's name:	Christina Anne	Vinther			
Manuscript Tit	le: Overvægtige g	ravide og kom	plikationer ved	graviditet og fødsel		
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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your institution	Entity	Comments	
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Gifts	$\boxtimes$					Del ×
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**Section 1. Identifying Information.** 

Given Name:

Board membership

Consultancy

**Employment** 

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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your institution	Entity	Comments	
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Honoraria	$\boxtimes$					Del ×
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Other (err on the side of full disclosure)	$\boxtimes$					Del ×
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**Section 1. Identifying Information.** 

Given Name: (or first)	Søren	Surname: (or last)	Lunde	Effective Date:	
Are you the	corresponding author? [	Yes N	Jo	Format exam	ple: 07-August-2008
Corresponding	g author's name: Christ	ina Anne Vinte	r		
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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your institution	Entity	Comments	
Board membership	$\boxtimes$					Del ×
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Consultancy	$\boxtimes$					Del ×
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Employment	$\boxtimes$					Del ×
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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your institution	Entity	Comments	
Expert testimony	$\boxtimes$					Del ×
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Gifts	$\boxtimes$					Del×
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Patents (planned, pending or issued)	$\boxtimes$					Del ×
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Stock/stock options	$\boxtimes$					Del ×
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Other (err on the side of full disclosure)	$\boxtimes$					Del ×
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Jensen

Effective Date: 26-August-2011

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**Section 1. Identifying Information.** 

Dorte Møller

Given Name:

Consultancy

**Employment** 

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Corresponding a	author's name:	Christina Ann	e Vinter			
Manuscript Title	e: Overvægtige g	ravide og kom	nplikationer i relatio	on til graviditet og fødsel		
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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your institution	Entity	Comments	
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Travel/accommodations expenses covered or reimbursed	$\boxtimes$					Del ×
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Other (err on the side of full disclosure)	$\boxtimes$					Del ×
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# Section 4. Information about financial relationships involving your spouse or partner or your children (under 18 years of age).

Do your children or your spouse or partner have financial relationships with entities that have an interest in the content of the submitted work?
No other relationships/conditions/circumstances that present potential conflict of interest
Yes, the following relationships/conditions/circumstances are present (explain below):

#### Section 5. Information about relevant nonfinancial associations.

Do you have any relevant nonfinancial associations or interests (personal, professional, political, institutional, religious, or other) that a reasonable reader would want to know about in relation to the submitted work?
No relevant nonfinancial relationships/conditions/circumstances to report.
Yes, the following relevant nonfinancial relationships/conditions/circumstances are present (explain below):

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

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#### **INSTRUCTIONS:**

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form has five parts.

#### 1. Identifying information.

Each author should submit a separate form. Provide complete information and double-check the manuscript number. If you are NOT the corresponding author please insert his or her name.

## 2. The work under consideration for publication.

Please provide information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The idea is to provide for the reader information about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. If you check the "No" box it means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds to pay you. If you or your institution did receive funds from a third party to support the work, check "Yes" along with the appropriate boxes to indicate the type of support and whether you or your institution received it.

#### 3. Relevant financial activities outside the submitted work.

Please report all sources of revenue relevant to the submitted work that accrued either directly to you or were paid to your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. If there is any question, it is usually better to disclose a relationship than not to do so. Please note that your interactions with the work's sponsor outside the submitted work should be listed here. For each category list each entity on a separate line. Use as many lines as necessary to provide complete information. In addition, please disclose relationships that fall outside the 36-month window that readers may want to know about and could reasonably criticize you for not disclosing (for example, long-term financial relationships that are now ended).

The goal of this section is to provide information for our reviewers and readers about your interactions with entities in the biomedical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer. For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to benefit financially from the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as the NIH or the MRC, need not be disclosed. For example, if the NIH sponsored a piece of work you have been involved in but drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

#### 4. Financial relationships involving your spouse or partner or your children (under 18 years of age).

If monies from the types of relationships listed in Section 3 were paid to your spouse or partner or dependent children, please list the type of activity and source of the money.

#### 5. Nonfinancial associations.

Please report any personal, professional, political, institutional, religious, or other associations that a reasonable reader would want to know about in relation to the submitted work.



**Section 1. Identifying Information.** 

Given Name: (or first)	Kristina	Surname (or last)	: Renault		Format example: 07-August		
Are you the	e corresponding au	ithor?  Yes	No				
Correspondin	g author's name:	Christina Anne Vin	ter				
Manuscript T	itle: Overvægtige	gravide og gravidite	et i relation til	graviditet og fødsel.			
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Section 2. Info	ormation abou	t the support of	the work	under considerat	ion for publication	on.	
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Section 3. Info	ormation abou	t relevant financ	cial relatio	onships outside t	he submitted wo	rk.	
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Type of Relationship (in alphabetical order)	No	Paid to You	Your institution	Entity	Comments	
Board membership						Del ×
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Consultancy	$\boxtimes$					Del ×
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Employment						Del ×
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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your institution	Entity	Comments	
Expert testimony	$\boxtimes$					Del×
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Gifts	$\boxtimes$					Del ×
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Grants/grants pending	$\boxtimes$					Del ×
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Payment for manuscript preparation	$\boxtimes$					Del×
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Patents (planned, pending or issued)	$\boxtimes$					Del ×
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Payment for development of educational presentations including service on speakers' bureaus	$\boxtimes$					Del ×
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Travel/accommodations expenses covered or reimbursed	$\boxtimes$					Del×
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Other (err on the side of full disclosure)	$\boxtimes$					Del ×
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