

Section 1. Identi	fying Information	
Given Name (First Name) Charlotte	2. Surname (Last Name) Møller	3. Effective Date (07-August-2008) 10-December-2012
4. Are you the corresponding	ng author? Yes No	
5. Manuscript Title Mobilt sundhedstilbud til	udenlandske prostituerede i Region Midt- og Nordjy	ylland.
6. Manuscript Identifying N	umber (if you know it)	

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
I. Grant	✓					
2. Consulting fee or honorarium	V					A
S. Support for travel to meetings for the study or other purposes	✓					А
 Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like 	V					Α
. Payment for writing or reviewing the manuscript	✓					A
 Provision of writing assistance, medicines, equipment, or administrative support 	✓					A
øller						



The Work Under Consideration for Publication									
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
						ADD			
7. Other	V					×			
	10:50:00 E/ V					ADD			

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

Relevant financial activities out			Marie Control of the	01 N II (210	The second second	
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
Board membership	V					>
2. Consultancy	V					AD X
3. Employment	V					>
4. Expert testimony	✓					AC
5. Grants/grants pending	/					AU >
 Payment for lectures including service on speakers bureaus 	/					AE >
7. Payment for manuscript preparation	V					AC >

Møller 3

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
8. Patents (planned, pending or						ADD			
issued)	1					×			
9. Royalties	V					ADD			
(7)			Ш			ADD			
 Payment for development of educational presentations 	✓					×			
11. Stock/stock options	V					ADD			
	·					ADD			
 Travel/accommodations/ meeting expenses unrelated to activities listed** 	✓					×			
Other (err on the side of full disclosure)	V					ADD			
* This means money that your institution ** For example, if you report a consultanc	received f y above th	or your effo nere is no n	orts. seed to report tra	avel related to that consulta	ency on this line.	ADD			
Section 4. Other relationsh	ips	466	1101		the Parent				
Are there other relationships or activity potentially influencing, what you wro	ties that r te in the	readers co submitted	uld perceive to d work?	have influenced, or tha	t give the appearance of				
✓ No other relationships/conditions	/circums	tances tha	t present a po	tential conflict of interes	i				
Yes, the following relationships/co	nditions	/circumsta	ances are prese	ent (explain below):					
At the time of manuscript acceptance, On occasion, journals may ask authors	, journals to disclo	will ask a ose further	uthors to confi r information a	rm and, if necessary, upo bout reported relations	date their disclosure state lips.	ements.			
Hide All Tab	le Rows	Hide All Table Rows Checked 'No' SAVE							





1. Given Name (First Name)		
Jette	2. Surname (Last Name) Mæng	 Effective Date (07-August-2008) December-2012
4. Are you the corresponding author?	Yes No	Corresponding Author's Name Charlotte Møller
5. Manuscript Title Mobilt sundhedstilbud til udenlandske	prostituerede i Region Mic	lt- og Nordjylland.
6. Manuscript Identifying Number (if you kn	ow it)	

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

The Work Under Consideration	for Pub	lication	TO KAN	Property of the pr	LEAD TO BE	
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	1					×
2. Consulting fee or honorarium	/					ADD X
Support for travel to meetings for the study or other purposes	V					×
 Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like 	V					ADD ×
Payment for writing or reviewing the manuscript	✓					ADD ×
Provision of writing assistance, medicines, equipment, or administrative support	✓					ADD ×
Magner						7



The Work Under Consideration for Publication									
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
						ADD			
7. Other	✓					×			
						ADD			

Section 3.

Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

Relevant financial activities out	side th	e submitt	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership	V					×
2. Consultancy	V					ADD X
3. Employment	1					×
4. Expert testimony	V					ADD ×
5. Grants/grants pending	1					×
Payment for lectures including service on speakers bureaus	✓					ADD X
7. Payment for manuscript preparation	V					×

Mæng 3

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities outside the submitted work							
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments		
9. Detaute (alamand and the						ADD	
Patents (planned, pending or issued)	✓					×	
9. Royalties	V					ADD	
	·					ADD	
 Payment for development of educational presentations 	V					×	
11 Stock/stock antique						ADD	
11. Stock/stock options	1		Ш			×	
 Travel/accommodations/ meeting expenses unrelated to activities listed** 	/					ADD ×	
13. Other (err on the side of full disclosure)	✓					ADD ×	
* This means money that your institution ** For example, if you report a consultanc	received t y above t	for your effo here is no n	orts. leed to report tra	avel related to that consulta	incy on this line.	ADD	
Section 4. Other relationsh	ips	179	1				
Are there other relationships or activity potentially influencing, what you wro	te in the	submitted	d work?				
No other relationships/conditions,					:		
Yes, the following relationships/co	nditions	s/circumst	ances are prese	ent (explain below):			
At the time of manuscript acceptance. On occasion, journals may ask authors	journals to discl	s will ask a ose furthe	uthors to confi r information a	rm and, if necessary, upo bout reported relationsh	date their disclosure state nips.	ments.	
Hide All Tab	le Rows	Checked	'No'	SAVE			



Section 1. Identifying Info	rmation	
Given Name (First Name) Anette	2. Surname (Last Name) Skjoldborg	3. Effective Date (07-August-2008) 10-December-2012
4. Are you the corresponding author?	Yes V No	Corresponding Author's Name Charlotte Møller
5. Manuscript Title Mobilt sundhedstilbud til udenlands	ke prostituerede i Region M	idt- og Nordjylland.
6. Manuscript Identifying Number (if yo	u know it)	

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

The Work Under Consideration	for Pub	lication				6 8.0
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	1					×
2. Consulting fee or honorarium	✓					× ADD
Support for travel to meetings for the study or other purposes	✓					×
 Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like 	V					ADD ×
5. Payment for writing or reviewing the manuscript	V					ADD ×
Provision of writing assistance, medicines, equipment, or administrative support	/					× ×
Skjoldborg						2



The Work Under Consider	ation for Pub	lication	WE WARL	5. 48. 5.	THE THE ST	
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
						ADD
7. Other	1					×
						ADD

Section 3.

Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

Relevant financial activities out	side th	e submitt	ted work	NUKCEN K		
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership	V					×
2. Consultancy	/					ADD X
3. Employment	V					×
4. Expert testimony	/					ADD X
5. Grants/grants pending	/					ADD ×
Payment for lectures including service on speakers bureaus	V					ADD X
7. Payment for manuscript preparation	V					ADD X

Skjoldborg 3

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities out	side the	e submit	ted work	ATTEM TO	WILLIAM ST. WILLIAM	17.5
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
9. Patents (planned manding as						ADD
Patents (planned, pending or issued)	1					×
9. Royalties	V		П			ADD
						ADD
 Payment for development of educational presentations 	\checkmark					×
11. Stock/stock options	V					ADD
						ADD
 Travel/accommodations/ meeting expenses unrelated to activities listed** 	✓					×
13. Other (err on the side of full						ADD
disclosure)	\checkmark					×
* This means money that your institution ** For example, if you report a consultance Section 4. Other relationsh	y above t	for your eff here is no r	orts. need to report tra	vel related to that consult	ancy on this line.	ADD
The second secon		Į.				
Are there other relationships or activit potentially influencing, what you wro	te in the	submitted	ould perceive to d work?	have influenced, or tha	it give the appearance of	
Alo other relationships/see disiance	f=1					
✓ No other relationships/conditions. Yes, the following relationships/co					t	
At the time of manuscript acceptance, On occasion, journals may ask authors	, journal to discl	s will ask a ose furthe	uthors to confi r information a	rm and, if necessary, up bout reported relations	date their disclosure state hips.	ements.
Hide All Tab	le Rows	Checked	'No'	SAVE		



Section 1.	Identifying Infor	mation		
1. Given Name (F Susanne	irst Name)	2. Surname (Last Name) Hammelboe	3. Effective Date (07-Ar 10-December-2012	ugust-2008
4. Are you the co	rresponding author?	Yes No	Corresponding Author's Name Charlotte Møller	
5. Manuscript Tit Mobilt sundhed		e prostituerede i Region M	lidt- og Nordjylland.	
6. Manuscript Ide	entifying Number (if you	know it)		

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

The Work Under Consideration f	or Pub	lication	EN BAK		XXXXXXXX	W. W.
Туре	No	Money Paid to You	Money to Your Institution	Name of Entity	Comments	
1. Grant	1					×
2. Consulting fee or honorarium	/					X ADD
Support for travel to meetings for the study or other purposes	V					×
Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	✓					ADD ×
Payment for writing or reviewing the manuscript	✓					ADD ×
Provision of writing assistance, medicines, equipment, or administrative support	V					× ADD
Hammelboe						2



The Work Under Consider	ation for Pub	lication	None		WE WANTED	
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
						ADD
7. Other	✓					×
						ADD

Section 3.

Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

Relevant financial activities out	side the	submitt	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership	V					×
2. Consultancy	V					ADD X
3. Employment	\checkmark					ADD ×
4. Expert testimony	V					ADD ×
5. Grants/grants pending	V					ADD
Payment for lectures including service on speakers bureaus	/					ADD
7. Payment for manuscript preparation	V					ADD

Hammelboe

^{*} This means money that your institution received for your efforts on this study.

^{**} Use this section to provide any needed explanation.



Relevant financial activities out	side th	e submit	ted work		11 × 12 V/2	
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
Patents (planned, pending or issued)	/					ADE ×
9. Royalties	/					ADE ×
10. Payment for development of educational presentations	V					ADD ×
11. Stock/stock options	/					ADD ×
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	V					× ×
13. Other (err on the side of full disclosure)	✓					ADD ×
* This means money that your institution ** For example, if you report a consultance Section 4. Other relationship	cy above			avel related to that consul	tancy on this line.	ADD
Are there other relationships or activi potentially influencing, what you wro	ities that			o have influenced, or th	at give the appearance	of
No other relationships/conditions Yes, the following relationships/c	ondition	s/circums	tances are pres	ent (explain below):		
At the time of manuscript acceptance On occasion, journals may ask author						tatements

Hammelboe 4

