

Section 1.	Identifying In	formation	
1. Given Name (F Jesper ELberlin	10 Final ANGERTAL	2. Surname (Last Name) Elberling	3. Effective Date (07-August-2008) 08-April-2013
4. Are you the co	rresponding author	? ✓ Yes No	
5. Manuscript Tit		as til dufter og komiske stoffer kan av koder i SVS	
		et til dufte og kemiske stoffer kan nu kodes i SKS	
6. Manuscript Ide UFL-10-12-0627	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...)?

No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1					18
<b>V</b>					A
<b>V</b>					33
<b>V</b>					A
<b>V</b>					A
<b>V</b>					A
		No Paid to You  V	No Paid Your Institution*	No Paid Your to You Institution*  Name of Entity  I	No Paid Your Institution*  Name of Entity Comments**    O



The Work Under Conside	eration for Pub	lication				
Туре	No	Money Paid to You	Money to Your Institution	Name of Entity	Comments**	
						ADD
7. Other	<b>✓</b>					×
						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	outside the	e submitt	ted work	AL PERSON	Talkettall .	100
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
Board membership	<b>V</b>					×
2. Consultancy	<b>V</b>					X ADD
3. Employment	$\checkmark$					ADD X
4. Expert testimony	$\checkmark$					ADD X
5. Grants/grants pending	$\checkmark$					ADD X
Payment for lectures includir service on speakers bureaus	ng 🗸					ADD ×
7. Payment for manuscript preparation	<b>✓</b>					ADD X

Elberling 3

<sup>\*</sup> This means money that your institution received for your efforts on this study.

<sup>\*\*</sup> Use this section to provide any needed explanation.



Relevant financial activities out  Type of Relationship (in alphabetical order)	side the	Money Paid to You	ted work  Money to  Your  Institution*	Entity	Comments	
8. Patents (planned, pending or issued)	<b>V</b>					ADD ×
9. Royalties	<b>V</b>					ADD ×
Payment for development of educational presentations	<b>✓</b>					ADD ×
11. Stock/stock options	<b>✓</b>					ADD ×
<ol> <li>Travel/accommodations/ meeting expenses unrelated to activities listed**</li> </ol>	<b>V</b>					ADD ×
Other (err on the side of full disclosure)	<b>✓</b>					ADD ×
* This means money that your institution ** For example, if you report a consultance	received y above t	for your effo here is no n	orts. need to report tra	vel related to that consults	ancy on this line.	ADD
Section 4. Other relationsh	ips	11 8-21	S 141 8 1			195
Are there other relationships or activi potentially influencing, what you wro	ties that te in the	readers co submitted	ould perceive to d work?	have influenced, or tha	t give the appearance	of
✓ No other relationships/conditions  Yes, the following relationships/co					t	

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements.

Hide All Table Rows Checked 'No'

On occasion, journals may ask authors to disclose further information about reported relationships.

SAVE



Section 1.	Identifying Infor	mation	
1. Given Name (F Jens Peter	irst Name)	2. Surname (Last Name) Ellekilde Bonde	3. Effective Date (07-August-2008) 09-April-2013
4. Are you the co	rresponding author?	☐ Yes ✓ No	Corresponding Author's Name Jesper Elberling
5. Manuscript Tit	le		
Patienten med :	symptomer relateret ti	l dufte og kemiske stoffer	
6. Manuscript Ide USL-10-12-0627	entifying Number (if you l	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**	
1. Grant	1					×
2. Consulting fee or honorarium	<b>V</b>					ADD X
Support for travel to meetings for the study or other purposes	<b>V</b>					×
<ol> <li>Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like</li> </ol>	<b>✓</b>					ADD ×
Payment for writing or reviewing the manuscript	<b>✓</b>					ADD ×
Provision of writing assistance, medicines, equipment, or administrative support	<b>✓</b>					× ×
Ellekilde Bonde						2



The Work Under Consideration for Publication								
Туре	No	Money Paid to You	Money to Your Institution	Name of Entity	Comments**			
						ADD		
7. Other	1					×		
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#### Section 3.

Relevant financial activities outside the submitted work.

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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
. Board membership	<b>V</b>					
2. Consultancy	$\checkmark$					
3. Employment	$\checkmark$					
. Expert testimony	<b>V</b>					,
5. Grants/grants pending	<b>V</b>					A
i. Payment for lectures including service on speakers bureaus	<b>✓</b>					A
7. Payment for manuscript preparation	<b>✓</b>					A

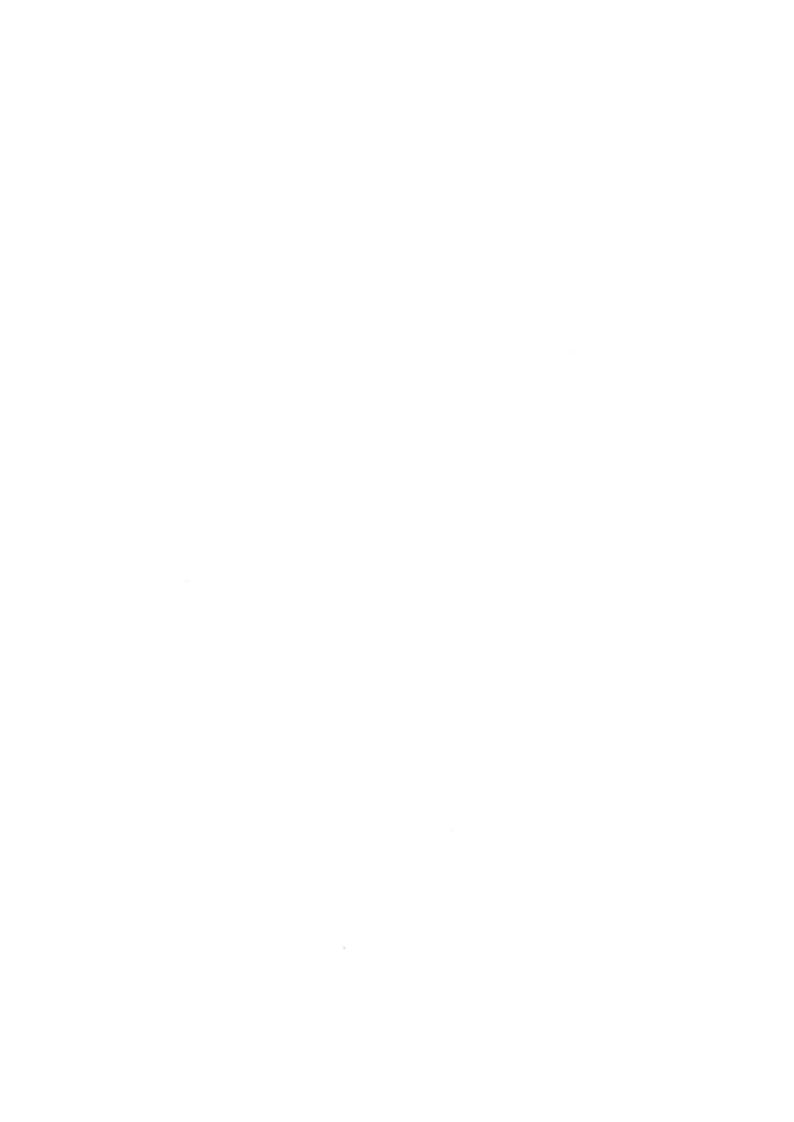
Ellekilde Bonde 3

<sup>\*</sup> This means money that your institution received for your efforts on this study.

<sup>\*\*</sup> Use this section to provide any needed explanation.



Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
Patents (planned, pending or issued)	<b>V</b>					ADD ×
9. Royalties	<b>7</b>					ADD
3. Noyanes	V		Ш			ADD
Payment for development of educational presentations	<b>✓</b>					×
11. Stock/stock options	<b>✓</b>					ADD ×
<ol> <li>Travel/accommodations/ meeting expenses unrelated t activities listed**</li> </ol>	o 🗸					×
13. Other (err on the side of full disclosure)	<b>V</b>					ADD ×
* This means money that your institu  ** For example, if you report a consul  Section 4. Other relatio	tancy above	for your eff there is no r	orts. need to report tra	evel related to that consulta	ancy on this line.	ADD
Are there other relationships or ac potentially influencing, what you	wrote in the	submitte	d work?			of
No other relationships/conditi  Yes, the following relationship					t	
		le will ack a	uthors to confi	rm and, if necessary, upo	data thair dia darres at	atomonto





Section 1.	Identifying Infor	mation	
1. Given Name (F Søren	irst Name)	2. Surname (Last Name) Vesterhauge	3. Effective Date (07-August-2008) 02-April-2013
4. Are you the co	rresponding author?	Yes No	Corresponding Author's Name Jesper Elberling
5. Manuscript Titl Patienter med s		dufte og kemiske stoffer k	an nu kodes specifikt med SKS
6. Manuscript Ide UFL-10-12-0627	entifying Number (if you 7.R2	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...)?

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.

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

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The Work Under Conside	ration for Pub	lication				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
						ADD
7. Other	<b>/</b>					×
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## 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	Relevant financial activities outside the submitted work								
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution	Entity	Comments				
1. Board membership	<b>V</b>					×			
2. Consultancy	<b>✓</b>					ADD X			
3. Employment	<b>/</b>					ADD ×			
4. Expert testimony	<b>V</b>					ADD			
5. Grants/grants pending	<b>V</b>					ADD			
Payment for lectures including service on speakers bureaus	<b>V</b>					ADD ×			
7. Payment for manuscript preparation	<b>/</b>					ADD ×			

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<sup>\*</sup> This means money that your institution received for your efforts on this study.

<sup>\*\*</sup> Use this section to provide any needed explanation.



Relevant financial activities out	side th	e submit	ted work		78-111	
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
O Detects (also and asseting as						ADD
<ol><li>Patents (planned, pending or issued)</li></ol>	1					*
202700200		_				ADD
9. Royalties	<b>V</b>					×
Payment for development of educational presentations	<b>7</b>					ADD ×
11. Stock/stock options	<b>V</b>					ADD
TH Stock Stock Options	V		ш			ADD
<ol> <li>Travel/accommodations/ meeting expenses unrelated to activities listed**</li> </ol>	<b>/</b>					×
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			ravel related to that consult	ancy on this line.	ADD
		1900 <b>4</b> 000				
Are there other relationships or activi potentially influencing, what you wro				o have influenced, or the	at give the appearance of	of
✓ No other relationships/conditions	/circum	stances th	at present a po	otential conflict of interes	st	
Yes, the following relationships/co	ondition	s/circums	tances are pres	ent (explain below):		
At the time of manuscript acceptance On occasion, journals may ask author						atements.
			VIVO S			

Vesterhauge 4





Section 1.	Identifying Infor	mation	35 25	
Given Name (F Søren	irst Name)	2. Surname (Las Bang	Name)	3. Effective Date (07-August-2008) 03-April-2013
4. Are you the co	rresponding author?	☐ Yes 🗸		onding Author's Name Elberling
5. Manuscript Titl Patienten med	le symptomer relateret ti	l dufte og kemiske	stoffer kan nu kode	es specifikt med SKS
6. Manuscript Ide UFL-10-12-0627	entifying Number (if you 7.R2	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...)?

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.

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

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The Work Under Consider	ation for Pub	lication		A STAN AND S		7 19
Туре	No	Money Paid to You	Money to Your Institution	Name of Entity	Comments**	
						ADD
7. Other	<b>✓</b>					×
						ADD

### Section 3. Rolevar

Relevant financial activities outside the submitted work.

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

<sup>\*</sup> This means money that your institution received for your efforts on this study.

<sup>\*\*</sup> Use this section to provide any needed explanation.



Relevant financial activities out	side th	e submit	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	H
						ADD
<ol><li>Patents (planned, pending or issued)</li></ol>	1					×
9. Royalties	<b>V</b>					ADD
5. noyanes	V	Ш				ADD
Payment for development of educational presentations	<b>V</b>					×
11. Stock/stock options						ADD
11. Stock/stock options	<b>✓</b>					ADD
<ol> <li>Travel/accommodations/ meeting expenses unrelated to activities listed**</li> </ol>	<b>✓</b>					×
12 04 / 4 11 (/ #						ADD
<ol><li>Other (err on the side of full disclosure)</li></ol>	$\checkmark$					×
*This means money that your institution ** For example, if you report a consultance  Section 4.	y above			avel related to that consult	ancy on this line.	ADD
Other relationsh	ips					
Are there other relationships or activi potentially influencing, what you wro				o have influenced, or the	at give the appearance of	
✓ No other relationships/conditions	/circum	stances th	at present a po	tential conflict of interes	st	
Yes, the following relationships/co	ondition	s/circums	tances are pres	ent (explain below):		
At the time of manuscript acceptance On occasion, journals may ask author						ments.
Hide All Tal	ole Row	s Checked	I'No'	SAVE		





Section 1.	Identifying Inform	nation	
1. Given Name (Fi Allan	irst Name)	2. Surname (Last Name) Linneberg	3. Effective Date (07-August-2008) 03-April-2013
4. Are you the cor	responding author?	Yes No	Corresponding Author's Name Jesper Elberling
5. Manuscript Titl Patienten med s		dufte og kemiske stoffer k	an nu kodes specifikt med SKS
6. Manuscript Ide UFL-10-12-0627	ntifying Number (if you k .R2	now 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**	
. Grant	1					×
. Consulting fee or honorarium	<b>V</b>					AD X
. Support for travel to meetings for the study or other purposes	<b>V</b>					×
. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	<b>V</b>					AD X
. Payment for writing or reviewing the manuscript	<b>✓</b>					AD ×
Provision of writing assistance, medicines, equipment, or administrative support	<b>V</b>					AD:



The Work Under Consider	ration for Pub	lication			NEW DE	BOX
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.

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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.

Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
. Board membership	<b>V</b>					1
. Consultancy	<b>V</b>					A
. Employment	<b>V</b>					A
. Expert testimony	<b>V</b>					A
. Grants/grants pending	$\checkmark$					A
Payment for lectures including service on speakers bureaus	<b>V</b>					A
. Payment for manuscript preparation	<b>V</b>					A

Linneberg 3

<sup>\*</sup> This means money that your institution received for your efforts on this study.

<sup>\*\*</sup> Use this section to provide any needed explanation.



Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
Patents (planned, pending or issued)	<b>✓</b>					ADI
9. Royalties	<b>/</b>					ADI
Payment for development of educational presentations	<b>V</b>					ADI ×
11. Stock/stock options	<b>✓</b>					ADI ×
Travel/accommodations/ meeting expenses unrelated to activities listed**	<b>V</b>					ADE ×
Other (err on the side of full disclosure)	<b>V</b>					ADE
* This means money that your institution ** For example, if you report a consultance				avel related to that consult	ancy on this line.	ADE
Section 4. Other relationsh	nips	1000	Je u v	- X - X - 1		9 10
Are there other relationships or activi potentially influencing, what you wro	ties that	readers co	ould perceive to	o have influenced, or tha	at give the appearance o	f

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.





Section 1.	Identifying Inform	nation	Landa of the Control
Given Name (Fi Claus	irst Name)	2. Surname (Last Name) Zachariae	3. Effective Date (07-August-2008) 12-October-2012
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Name Jesper Elberling
5. Manuscript Title Diagnosekode ti		omer relateret til dufte og	kemiske stoffer
6. Manuscript Ider	ntifying Number (if you kr	now 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...)?

		Money	Money to		THE RESERVE OF THE PERSON NAMED IN	
Тура	No.	Paid to You	Your Institution*	Name of Entity	Comments**	
. Grant	1					
. Consulting fee or honorarium	$\checkmark$					A
Support for travel to meetings for the study or other purposes	<b>V</b>					A
Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	<b>V</b>					Al
Payment for writing or reviewing the manuscript	<b>V</b>					At 3
Provision of writing assistance, medicines, equipment, or administrative support	<b>✓</b>					AD ×



#### 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 is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in four parts.

### 1. Identifying information.

Enter your full name. If you are NOT the corresponding author please check the box "no" and a space to enter the name of the corresponding author in the space that appears. Provide the requested manuscript information. Double-check the manuscript number and enter it.

## The work under consideration for publication.

This section asks for 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 requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" 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 with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes". The complete the appropriate boxes to indicate the type of support and whether the payment went to you, or to your institution, or both.

### Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical 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.

Report all sources of revenue paid (or promised to be paid) directly to you or 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. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by 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 government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

## 4. Other relationships.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.



The Work Under Conside	ration for Pub	lication		A STATE OF THE STA	10000	W P
Туре	No	Paid	Money to Your Institution*	Name of Entity	Comments:	
V2001 V200 20 V200			44.			ADD
7. Other	<b>✓</b>					×
# This many and a second	***		• 00 - 1 th 100 100 0 1 - 1 th 100 100 100 100 100 100 100 100 100 10			ADD

### Section 3.

### Relevant financial activities outside the submitted work.

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Relevant financial activities ou	tside the	submitt	ted work	A STATE OF		
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
Board membership	1					×
2. Consultancy	<b>V</b>					ADD
3. Employment	1					ADD
4. Expert testimony	<b>V</b>					ADD ×
5. Grants/grants pending	<b>V</b>					ADD
Payment for lectures including service on speakers bureaus	<b>V</b>					ADD
Payment for manuscript preparation	<b>/</b>					ADD

<sup>\*</sup> This means money that your institution received for your efforts on this study.

<sup>\*\*</sup> Use this section to provide any needed explanation.



Relevant financial activities out	side th	e submit	ted work	ng Yhu i		11000	200
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution	Entity		Comment	s
8. Patents (planned, pending or							AD
issued)	$\checkmark$						×
9. Royalties	<b>V</b>						AD ×
Payment for development of educational presentations	<b>V</b>						AD:
Stock/stock options	<b>V</b>						ADI
	A C						ADI
<ol> <li>Travel/accommodations/ meeting expenses unrelated to activities listed<sup>4*</sup></li> </ol>	<b>✓</b>						×
Other (err on the side of full disclosure)	<b>✓</b>						ADE
This means money that your institution For example, if you report a consultance	y above t	for your effo here is no n	orts. eed to report tra	ivel related to that co	nsultancy	on this line.	ADD
Other relationsh Are there other relationships or activity potentially influencing, what you wro	ties that	readers co submitted	uld perceive to I work?	have influenced, o	or that giv	e the appearar	nce of
✓ No other relationships/conditions  Yes, the following relationships/co							
At the time of manuscript acceptance. On occasion, journals may ask authors	, journals	s will ask at	uthors to confi	rm and, if necessary	, update	their disclosure	e statements
Hide All Tab	le Rows	Checked '	No	SAVE			

Zachariae



Section 1.	Identifying Infor	mation	The state of the s
1. Given Name (F Jeanne	irst Name)	2. Surname (Last Name) Johansen	3. Effective Date (07-August-2008) 02-April-2013
4. Are you the co	rresponding author?	Yes V No	Corresponding Author's Name Jesper Elberling
5. Manuscript Tit	le		
Patienten med	symptomer relateret ti	l dufte og kemiske stoffer	kan nu kodes specifikt med SKS
6. Manuscript Ide UFL-10-12-0627	entifying Number (if you l 7.R2	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 Street of the Workship To Be South to the	CHARLES COMMON	Money	Money to			
Туре	No	Paid to You	Your Institution*	Name of Entity	Comments**	
1. Grant	1					×
201927 7 <b>24 St. N</b> 9		_				ADD
Consulting fee or honorarium	<b>V</b>					X
Support for travel to meetings for the study or other purposes	<b>V</b>					ADD ×
<ol> <li>Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like</li> </ol>	<b>V</b>					ADD X
Payment for writing or reviewing the manuscript	<b>✓</b>					ADD X
Provision of writing assistance, medicines, equipment, or administrative support	<b>V</b>					ADD ×
Johansen						2



The Work Under Consider	ation for Pub	lication	W (2 - 2 - 1)			ate i
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
						ADD
7. Other	1					×
						ADD

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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.

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Relevant financial activities outside the submitted work							
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution	Entity	Comments		
1. Board membership	<b>V</b>					×	
2. Consultancy	<b>V</b>					ADE X	
3. Employment	<b>V</b>					ADD ×	
4. Expert testimony	<b>/</b>					ADD X	
5. Grants/grants pending	<b>/</b>					ADD X	
Payment for lectures including service on speakers bureaus	<b>✓</b>					ADD ×	
7. Payment for manuscript preparation	<b>✓</b>					ADD	

Johansen 3

<sup>\*</sup> This means money that your institution received for your efforts on this study.

<sup>\*\*</sup> Use this section to provide any needed explanation.



Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
Patents (planned, pending or issued)	<b>V</b>					ADI
9. Royalties	<b>V</b>					ADI
Payment for development of educational presentations	<b>/</b>					ADI ×
11. Stock/stock options	<b>/</b>					ADI
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	<b>V</b>					ADI:
Other (err on the side of full disclosure)	<b>V</b>					ADE ×
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Section 4. Other relations	nins	AL SECT			THE PARTY NAMED IN	-1

No other relationships/conditions/circumstances that present a potential conflict of interest

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Section 1.	Identifying Infor	mation	No. of the Control of
1. Given Name (F Jette	First Name)	2. Surname (Last Name) Blands	3. Effective Date (07-August-2008) 04-April-2013
4. Are you the co	erresponding author?	Yes No	Corresponding Author's Name Jesper Elberling
5. Manuscript Tit In Danish: "Patie		relateret til dufte og kemi	ske stoffer kan nu kodes i SKS"
6. Manuscript Ide UFL-10-12-0627	entifying Number (if you 7	know it)	

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

Blands



The Work Under Consideration for Publication								
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
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Relevant financial activities outside the submitted work							
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments		
1. Board membership	1					×	
2. Consultancy	<b>/</b>					ADD X	
3. Employment	$\checkmark$					ADD ×	
4. Expert testimony	$\checkmark$					ADD ×	
5. Grants/grants pending	<b>/</b>					ADD X	
Payment for lectures including service on speakers bureaus	<b>V</b>					ADD ×	
7. Payment for manuscript preparation	<b>/</b>					ADD ×	

Blands 3

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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
Patents (planned, pending or issued)	<b>V</b>					ADE ×
9. Royalties	<b>/</b>					ADE
Payment for development of educational presentations	<b>/</b>					ADE ×
1. Stock/stock options	<b>/</b>					ADE ×
Travel/accommodations/ meeting expenses unrelated to activities listed**	<b>V</b>					ADE ×
Other (err on the side of full disclosure)	<b>V</b>					ADD
* This means money that your institution ** For example, if you report a consultance				el related to that consult	tancy on this line.	ADD
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Are there other relationships or activi	ities that			nave influenced, or th	at give the appearance o	f

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Section 1.	Identifying Information									
1. Given Name (F Sine	irst Name)	2. Surnar Skovbjer	ne (Last Name) 'g	3. Effective Date (07-August-2008)						
4. Are you the co	rresponding author?	Yes	<b>✓</b> No	Corresponding Author's Name						
5. Manuscript Tit	le									
6. Manuscript Ide UFL-10-12-0627	entifying Number (if you k 7	now 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	18 72H) 18		AV. TOWN OF	
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	<b>V</b>					×
2. Consulting fee or honorarium	<b>V</b>					X ADD
Support for travel to meetings for the study or other purposes	<b>V</b>					×
<ol> <li>Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like</li> </ol>	<b>V</b>					× ×
Payment for writing or reviewing the manuscript	<b>✓</b>					ADD X
Provision of writing assistance, medicines, equipment, or administrative support	<b>V</b>					ADD ×
Skovbjerg						2



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

#### Section 3.

Relevant financial activities outside the submitted work.

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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 activ	Relevant financial activities outside the submitted work							
Type of Relationship alphabetical order		Money Paid to You	Money to Your Institution	Entity	Comments			
1. Board membership	<b>/</b>					×		
2. Consultancy	<b>V</b>					ADD X		
3. Employment	<b>V</b>					X		
4. Expert testimony	<b>/</b>					ADD X		
5. Grants/grants pending	<b>V</b>					ADD X		
Payment for lectures inc service on speakers bure						ADD ×		
7. Payment for manuscript preparation	· 🗸					ADD X		

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<sup>\*</sup> This means money that your institution received for your efforts on this study.

<sup>\*\*</sup> Use this section to provide any needed explanation.



Relevant financial ac	tivities out	side th	e submitt	ted work			T.
Type of Relationsh alphabetical ord		No	Money Paid to You	Money to Your Institution*	Entity	Comments	
8. Patents (planned, per issued)	nding or	<b>V</b>					ADE ×
9. Royalties		<b>V</b>					ADC ×
10. Payment for develop educational presenta		<b>✓</b>					ADE ×
11. Stock/stock options		<b>V</b>					ADD ×
<ol> <li>Travel/accommodation</li> <li>meeting expenses uractivities listed**</li> </ol>	THE THE CHARLES	<b>✓</b>					ADD ×
13. Other (err on the side disclosure)	of full	<b>✓</b>					ADD ×
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No other relationships/conditions/circumstances that present a potential conflict of interest

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