

#### **Instructions**

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earning royalties or not

Bonde 1



| Section 1.  | Identifying Inform                                | nation                          |                               |  |
|---|---|---------------------------------|-------------------------------|--|
| Given Name (First Name)  Jens Peter   |   | 2. Surname (Last Name)<br>Bonde | 3. Date                       |  |
| 4. Are you the corresponding author?  |   | Yes ✓ No                        | Corresponding Author's Name   |  |
| 5. Manuscript Title<br>Ny praksis for anerkendelse af arbejdsbetinget hudkræft  |   |                                 |                               |  |
| 6. Manuscript Ider  | 6. Manuscript Identifying Number (if you know it) |                                 |                               |  |
|   |   |                                 |                               |  |
| Section 2.  | The Work Under C                                  | onsideration for Publ           | ication                       |  |
| Did you or your institution <b>at any time</b> receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  Are there any relevant conflicts of interest?  Yes  Vo   |   |                                 |                               |  |
| 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 <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes Vo |   |                                 |                               |  |
| Section 4.  | Intellectual Prope                                | rty Patents & Copyr             | ights                         |  |
| Do you have any   | patents, whether plan                             | ned, pending or issued, k       | oroadly relevant to the work? |  |

Bonde 2



| Section 5. Relationships not severed above   |
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| Relationships not covered above  |
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| Section 6. Disclosure Statement  |
| Disclosure Statement   |
| Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.  |
| I have no conflicts of interest  |

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Wulf 1



| Section 1. Identifying Inform   | nation                          |  |
|---|---------------------------------|--|
| Given Name (First Name)  Hans Christian Olsen   | 2. Surname (Last Name)<br>Wulf  | 3. Date<br>11-March-2015   |
| 4. Are you the corresponding author?  | ☐ Yes ✓ No                      | Corresponding Author's Name Tove Agner   |
| 5. Manuscript Title<br>Ny praksis for anerkendelse af arbejdsbetinget hudkræft  |                                 |  |
| 6. Manuscript Identifying Number (if you k  | now it)                         |  |
|   |                                 |  |
| Section 2. The Work Under C   | onsideration for Publi          | cation   |
|   | g but not limited to grants, da | a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation, |
| Section 3. Polygont financial   |                                 | and and the alternation  |
| 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 <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes Vo |                                 |  |
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| Do you have any patents, whether plan   | ned, pending or issued, b       | roadly relevant to the work? Yes No  |

Wulf 2



| Section 5.   | Relationships not covered above  |  |
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|  | relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work? |  |
| Yes, the following relationships/conditions/circumstances are present (explain below):   |  |  |
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| Section 6.   | Disclosure Statement   |  |
| Based on the abo   | ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box  |  |
| Dr. Wulf has not   | hing to disclose.  |  |

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Wulf 3



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Ebbehøj 1



| Section 1. Identify   | ng Information                              |  |
|---|---|--|
| 1. Given Name (First Name)<br>Niels Erik  | 2. Surname (Last Name)<br>Ebbehøj           | 3. Date<br>12-March-2015   |
| 4. Are you the corresponding a  | uthor? Yes 🗸 No                             | Corresponding Author's Name Tove Agner   |
| 5. Manuscript Title<br>Ny praksis for anerkendelse af arbejdsbetinget hudkræft  |   |  |
| 6. Manuscript Identifying Num   | ber (if you know it)                        |  |
|   |   |  |
| Section 2. The Wor  | k Under Consideration for Publ              | lication   |
|   | ork (including but not limited to grants, o | m a third party (government, commercial, private foundation, etc.) for<br>data monitoring board, study design, manuscript preparation, |
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| Intellect   | ual Property Patents & Copyr                | ights  |
| Do you have any patents, w  | nether planned, pending or issued, b        | oroadly relevant to the work? Yes V No   |

Ebbehøj 2



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agner 1



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|---|---|--------------------------|--|--|
| Given Name (First Name) tove  | 2. Surname (Last Name)<br>agner   | 3. Date<br>12-March-2015 |  |  |
| 4. Are you the corresponding author?  | ✓ Yes No  |                          |  |  |
| 5. Manuscript Title<br>Ny praksis for anerkendelse af arbejdsb  | 5. Manuscript Title<br>Ny praksis for anerkendelse af arbejdsbetinget hudkræft  |                          |  |  |
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|   |   |                          |  |  |
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agner 2



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