

Section 1.	Identifying Informat	ion		CONTRACTOR OF THE		
Given Name (First Name) Wahida		Surname (Last Name) Chakari		3. Date		
4. Are you the corresponding author?		Yes No				
	5. Manuscript Title Necrobiotic Xanthogranulom in orbital region mistaken for Squamous cell Carcinoma					
6. Manuscript Ider UFL-07-18-0515	ntifying Number (if you know	it)				
Section 2.	The Work Under Con	ideration for Public	tion			
any aspect of the s statistical analysis,	ubmitted work (including bu	t not limited to grants, date	third party (government, con a monitoring board, study de	mmercial, private foundation, etc.) for sign, manuscript preparation,		
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of compensation clicking the "Add) with entities as described	in the instructions. Use relationships that were	one line for each entity; a	ationships (regardless of amount dd as many lines as you need by conths prior to publication.		
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Do you have any	patents, whether planned	, pending or issued, bro	adly relevant to the work?	Yes No		



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Dr. Chakari has	nothing to disclose.

Evaluation and Feedback



Section 1. Identifying In	formation			
Given Name (First Name) Filip	2. Surname (Last Name) Rangatchew	3. Date 19-November-2018		
4. Are you the corresponding author?	Yes No	Corresponding Author's Name Wahida Chakari		
5. Manuscript Title Nekrobiotisk xantogranulom i orbital regionen oprindeligt tolket som planocellulært karcinom				
Manuscript Identifying Number (if y UFL-11-18-0800	ou know it)			
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Given Name (F Navid	irst Name)	2. Surname Toyserkan	(Last Name) i	3. Date 19-November-2018
4. Are you the corresponding author?		Yes No		Corresponding Author's Name Wahida Chakari
5. Manuscript Title Nekrobiotisk xantogranulom i orbital regionen oprindeligt tolket som planocellulært karcinom			som planocellulært karcinom	
6. Manuscript Ide UFL-11-18-0800	ntifying Number (if you kn	ow it)		
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any aspect of the s statistical analysis,	submitted work (including	ve payment o but not limite	r services from ed to grants, da	a third party (government, commercial, private foundation, etc.) for sta monitoring board, study design, manuscript preparation,
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Dr. Toyserkani	has nothing to disclose.

Evaluation and Feedback



Section 1. Identifying I	nformation		
Given Name (First Name) Anette	2. Surname (Last Name) Pedersen Pilt	3. Date 20-November-2018	
4. Are you the corresponding author	? Yes Vo	Corresponding Author's Name Wahida Chakari	
5. Manuscript Title Nekrobiotisk xantogranulom i orbital regionen oprindeligt tolket som planocellulært karcinom			
Manuscript Identifying Number (if UFL-11-18-0800	you know it)		
Section 2.	der Consideration for Publi		
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of compensation) with entities as	described in the instructions. U Ild report relationships that we	nether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.	
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Dr. Pedersen Pi	It has nothing to disclose.

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