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| AOCC DISCLOSURE FORM |
| **Date:** | Click or tap to enter a date. |
| **Your Name:** | Click or tap here to enter text. |
| **Title:** | Click or tap here to enter text. |
| **Presentation Number (if known):** | Click or tap here to enter text. |
| In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. “Related” means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.The author’s relationships/activities/interests should be defined broadly. For all other items, the time frame for disclosure is the past three years. |

|  | **Name all entities with whom you have this relationship or indicate none (add rows as needed)** | **Specifications/Comments (e.g., if payments were made to you or to your institution)** |
| --- | --- | --- |
| **Time frame: Since the initial planning of the work** |
| **1** | All support for the present presentation (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) **No time limit for this item.** |

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|[ ]  **None** |

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|  | Click the tab key to add additional rows. |

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| **Time frame: past 36 months** |
| **2** | Grants or contracts from any entity (if not indicated in item #1 above). |

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|[ ]  **None** |

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| **3** | Royalties or licenses |

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|[ ]  **None** |

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| **4** | Consulting fees |

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|[ ]  **None** |

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| **5** | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events |

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|[ ]  **None** |

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| **6** | Support for attending meetings and/or travel |

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|[ ]  **None** |

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| **7** | Stock or stock options |

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|[ ]  **None** |

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| **8** | Receipt of equipment, materials, drugs, medical writing, gifts or other services |

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|[ ]  **None** |

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| **9** | Other financial or non-financial interests |

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|[ ]  **None** |

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| **Please place an “X” next to the following statement to indicate your agreement:** |
|[ ]  I certify that I have answered every question and have not altered the wording of any of the questions on this form. |