

Section 1.	dentifying Info	rmation	
1. Given Name (First Virginia	Name)	2. Surname (Last Name) Moyer	3. Effective Date (07-August-2008)
4. Are you the corres	ponding author?	✓ Yes No	
5. Manuscript Title Counseling to Prev	ent Skin Cancer		
6. Manuscript Identif	ying Number (if you	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 Publication								
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
1. Grant	4					×		
						ADD		
2. Consulting fee or honorarium						×		
					0.	ADD		
Support for travel to meetings for the study or other purposes				ANDO/U	2424	×		
the study of other purposes						ADD		
4. 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 						×		



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	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	0					×		
2. Consultancy				Horofarium	s for editing	ADD ×		
3. Employment				Ped	Jacks (AR)	X		
4. Expert testimony						×		
5. Grants/grants pending						ADD ×		
Payment for lectures including service on speakers bureaus						ADD		
						ADD		
Payment for manuscript preparation	7					×		

Moyer 3

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

^{**} 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	
8. Patents (planned, pending or issued)						
9. Royalties						
Payment for development of educational presentations						
1. Stock/stock options	1					<i>F</i>
2. Travel/accommodations/ meeting expenses unrelated to activities listed**	d					
 Other (err on the side of full disclosure) 						1
* This means money that your institution ** For example, if you report a consultand				avel related to that consult	ancy on this line.	
Section 4. Other relations	hips	FELI		PLES SELVE		

Are there 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?

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

Yes, the following relationships/conditions/circumstances are present (explain below):

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.

Hide All Table Rows Checked 'No'



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Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

Moyer 5



Section 1.	Identifying Infor	mation	
1. Given Name (F Susan J	First Name)	2. Surname (Last I Curry	ame) 3. Effective Date (07-August-2008)
4. Are you the co	erresponding author?	Yes V No	Corresponding Author's Name Virginia Moyer
5. Manuscript Tit Counseling to F	le Prevent Skin Cancer		
6. Manuscript Ide	entifying Number (if you	know it)	

Section 2. The Work Under Consideration for Publication

Curry

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



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.

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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					×	
						ADD	
2. Consultancy	1					×	
***						ADD	
3. Employment	1					×	
A Evaport toation and						ADD	
4. Expert testimony	1					X	
5. Grants/grants pending	1					ADD	
5. Glants/grants perioning	Y					ADD	
6. Payment for lectures including						and the same of	
service on speakers bureaus	1					×	
						ADD	
7. Payment for manuscript preparation	V					*	

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

^{**} 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	
						AD
Patents (planned, pending or issued)	1					×
						AD
9. Royalties	1					×
10. D						AD
Payment for development of educational presentations	1					×
						AD
1. Stock/stock options	1					AD
2. Travel/accommodations/						AU
meeting expenses unrelated to activities listed**						×
uctivities listed						AD
Other (err on the side of full disclosure)	7					×
uistissure/						AD
* This means money that your institution ** For example, if you report a consultant				1 1	lance of the line	

Section 4.	Other relationships
	relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
✓ No other rel	ationships/conditions/circumstances that present a potential conflict of interest
Yes, the follo	owing relationships/conditions/circumstances are present (explain below):
	nanuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. urnals may ask authors to disclose further information about reported relationships.

Hide All Table Rows Checked 'No'



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Section 1. Identifying Info	rmation	
1. Given Name (First Name) Joy	2. Surname (Last Name) Melnikow	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Virginia Moyer
5. Manuscript Title Counseling to Prevent Skin Cancer		
6. Manuscript Identifying Number (if you	ı know it)	

Section 2. The Work Under Consideration for Publication

Melnikow

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 t	or Pub	lication	# 7 P			NG (T
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant						×
						ADD
2. Consulting fee or honorarium	\(\)					×
						ADD
Support for travel to meetings for the study or other purposes						×
						ADD
 Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like 	P					*
						ADD
5. Payment for writing or reviewing the manuscript	A					×
						ADD
 Provision of writing assistance, medicines, equipment, or administrative support 						×



The Work Under Conside	ration for Pub	lication	11.79			
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.

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Relevant financial activities out	side the	e submitt	ted work	WAS IN		0 Q
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership						×
2. Consultancy	A					ADD
3. Employment	7					X ADD
4. Expert testimony	1					X ADD
5. Grants/grants pending	山					X ADD
6. Payment for lectures including service on speakers bureaus	4					×
7. Payment for manuscript preparation						ADD

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

^{**} 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	
		rou	institution			ADD
8. Patents (planned, pending or issued)						×
						ADD
9. Royalties						×
						ADD
10. Payment for development of educational presentations	20					×
						ADD
11. Stock/stock options						×
						ADD
12. Travel/accommodations/ meeting expenses unrelated to activities listed**						×
						ADD
13. Other (err on the side of full disclosure)	D					×
						ADD

Section 4. Other relationships

Are there 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?

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

Yes, the following relationships/conditions/circumstances are present (explain below):

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.

Hide All Table Rows Checked 'No'

^{**} For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.



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Section 1.	lentifying Info	rmation	
1. Given Name (First N Virginia	lame)	2. Surname (Last Name) Moyer	3. Effective Date (07-August-2008)
4. Are you the corresp	onding author?	✓ Yes No	
5. Manuscript Title Counseling to Preve	nt Skin Cancer		
6. Manuscript Identify	ring 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			THE RESERVE OF THE PERSON NAMED IN	Egy Sa
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	4					×
2. Consulting fee or honorarium						ADD ADD
3. Support for travel to meetings for the study or other purposes				AHRO/U	SPFF	ADD
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like						×
5. Payment for writing or reviewing the manuscript						×
 Provision of writing assistance, medicines, equipment, or administrative support 						×



The Work Under Consid	eration for Pub	lication	A 100 A			TOWN !
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
		/				ADD
7. Other						×
						ADD

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Relevant financial activities out	side the	submit	ted work	A MAY S	-	
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership	0					×
2. Consultancy				Horofarium	s for editing	ADD ×
3. Employment				Ped	Jacks (AR)	X
4. Expert testimony						×
5. Grants/grants pending						ADD ×
Payment for lectures including service on speakers bureaus						ADD
						ADD
Payment for manuscript preparation	7					×

Moyer 3

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

^{**} 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	
8. Patents (planned, pending or issued)						
9. Royalties						
Payment for development of educational presentations						
1. Stock/stock options	1					<i>F</i>
2. Travel/accommodations/ meeting expenses unrelated to activities listed**	d					
 Other (err on the side of full disclosure) 						1
* This means money that your institution ** For example, if you report a consultand				avel related to that consult	ancy on this line.	
Section 4. Other relations	hips	FELI		PLES SELVE		

Are there 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?

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Hide All Table Rows Checked 'No'



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2. Surname (Last N	ame) 3. Effective Date (07-August-2008)
Grossman	3. Effective Date (07-August-2006)
g author? Yes V No	Corresponding Author's Name Virginia Moyer
n Cancer	

Section 2. The Work Under Consideration for Publication

Grossman

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



Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
		10.00				ADD
7. Other						×
						ADD

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	d				
Consultancy	Z				
Employment					
. Expert testimony	g				
. Grants/grants pending	Z				
. Payment for lectures including service on speakers bureaus					
Payment for manuscript preparation	1				

Grossman

This means money that your institution received for your efforts on this

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



Type of Relationship (in	N.S.	Money Paid to	Money to Your	Entity	Comments	
alphabetical order)	No	You	Institution*	Entity	Comments	b
						Al
Patents (planned, pending or issued)						
						Al
9. Royalties						Al
10. Payment for development of	1					
educational presentations						A
11. Stock/stock options	0					
						Α
 Travel/accommodations/ meeting expenses unrelated to activities listed** 						3
12 Ohban (ann an tha side of full	/					A
 Other (err on the side of full disclosure) 						, i
						A
* This means money that your institution ** For example, if you report a consultan-	received cy above 1	for your ef here is no	forts. need to report tr	avel related to that consu	Itancy on this line.	
Section 4. Other relations	hins				of Section 1997	
Other relations	liha	_				

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

Yes, the following relationships/conditions/circumstances are present (explain below):

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Grossman



Section 1.	Identifying Infor	mation	
1. Given Name (F Tim	First Name)	2. Surname (Last Name) Wilt	3. Effective Date (07-August-2008)
4. Are you the co	rresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Virginia Moyer
5. Manuscript Tit Counseling to P	le Prevent Skin Cancer		
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	ication				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	Q					×
						ADD
2. Consulting fee or honorarium						×
						ADD
3. Support for travel to meetings for the study or other purposes						×
						ADD
 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	A					×
						ADD
Provision of writing assistance, medicines, equipment, or administrative support	d					×
Wilt						2



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.

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

Wilt 3

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

^{**} 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	
O. Detects /plane ad mandian av	\					P
Patents (planned, pending or issued)						
0. 0. 10.						F
9. Royalties						P
Payment for development of educational presentations	DK.					
1. Stock/stock options	\triangleleft					P
2. Travel/accommodations/						A
meeting expenses unrelated to activities listed**	A					
2.04. /						A
Other (err on the side of full disclosure)	4					

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

Section 4. Other relationships

Are there 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?

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

Yes, the following relationships/conditions/circumstances are present (explain below):

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.

Hide All Table Rows Checked 'No'

^{**} For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.



Evaluation and Feedback

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Section 1.	Identifying Info	rmation		
1. Given Name (F Kirsten	irst Name)	2. Surname (Last Name) Bibbins-Domingo		3. Effective Date (07-August-2008)
4. Are you the co	rresponding author?	☐ Yes ✓ No	Corresponding Author's Nar Virginia Moyer	me
5. Manuscript Tit	le			
Counseling to P	revent Skin Cancer			
	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	for Pub	lication	0 100 3 3 6			STELLA
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	Ø					×
	1					ADD
2. Consulting fee or honorarium						×
	/					ADD
Support for travel to meetings for the study or other purposes	4					×
						ADD
 Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like 	A					×
						ADD
Payment for writing or reviewing the manuscript	V					×
						ADD
 Provision of writing assistance, medicines, equipment, or administrative support 	A					*
Bibbins-Domingo	1					2



The Work Under Consider	ation for Pub	lication	10 247 (1)	The state of the	VOS LIVEY II	
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
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7. Other						×
	X					488
* This means money that your ins			forts on this study	<i>'</i> .		

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.

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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
1. Board membership	V				
2. Consultancy					
3. Employment	Y				
l. Expert testimony	P				
i. Grants/grants pending	\$ D				
5. Payment for lectures including service on speakers bureaus	M				
. Payment for manuscript preparation					

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



Relevant financial activities out Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
8. Patents (planned, pending or	4					ADD
issued)	X					×
9. Royalties	\square					ADE
5. Noyalues	M					ADI
Payment for development of educational presentations	Ø					×
11. Stock/stock options	Ø					ADD
	(ADD
 Travel/accommodations/ meeting expenses unrelated to activities listed** 	Ø					×
	,					ADE
Other (err on the side of full disclosure)	N/					×
* This means money that your institution ** For example, if you report a consultance				el related to that consu	Itancy on this line.	ADE

Are there 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? No other relationships/conditions/circumstances that present a potential conflict of interest Yes, the following relationships/conditions/circumstances are present (explain below):

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Hide All Table Rows Checked 'No'

Evaluation and Feedback

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Section 1.	Identifying Infor	mation	
1. Given Name (Fi Michael	rst Name)	2. Surname (Last Name) LeFevre	3. Effective Date (07-August-200)
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Name Virginia Moyer
5. Manuscript Title Counseling to Pr	e revent Skin Cancer		
6. Manuscript Ide	ntifying Number (if you	know it)	

Section 2. The Work Under Consideration for Publication

LeFevre

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.

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

2

The Work Under Consid	eration for Publ	lication				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
						ADD
7. Other						× ADD
						ADD

Section 3. Relevant financial activities outside the submitted work.

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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						×
2. Consultancy						ADD
3. Employment						×
4. Expert testimony						ADD ×
5. Grants/grants pending						×
Payment for lectures including service on speakers bureaus						ADD ×
7. Payment for manuscript preparation						×

LeFevre 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 ou Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
						AE
Patents (planned, pending or issued)						>
9. Royalties						AC
Payment for development of educational presentations	1					AC >
1. Stock/stock options						A
 Travel/accommodations/ meeting expenses unrelated to activities listed** 						AC
Other (err on the side of full disclosure)						3
* This means money that your institutio ** For example, if you report a consulta	n received ncy above	for your ef there is no	forts. need to report t	ravel related to that consul	tancy on this line.	A

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.

Hide All Table Rows Checked 'No'



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Evaluation and Feedback

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LeFevre 5



1. Given Name (First Name) Adelita	2. Surname (Last Name) Cantu	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Virginia Moyer
5. Manuscript Title Counseling to Prevent Skin Cancer		

Section 2. The Work Under Consideration for Publication

Cantu

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	1 1 1 1			
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	ф					×
2. Consulting fee or honorarium	+					ADD
3. Support for travel to meetings for the study or other purposes	+					× ADD
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like						×
5. Payment for writing or reviewing the manuscript	4					ADD ×
 Provision of writing assistance, medicines, equipment, or administrative support 						×



The Work	Under Consider	ation for Pub	lication		1 / / 200	With the state of	No. 140
	Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
							ADD
7. Other		Ġ					×
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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.

Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
Board membership					
Consultancy	—				
Employment	h				
Expert testimony	—				
Grants/grants pending	4				
Payment for lectures including service on speakers bureaus					
Payment for manuscript preparation					

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

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



		Money Paid to You	Money to Your Institution*	Entity	Comments
D					
Patents (planned, pending or issued)	P				
Royalties					
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Cantu 5



Section 1. Identifying Info	rmation				A. 1707 State	2186
Given Name (First Name) Glenn	2. Surr Flores	name (Last Na	me)		3. Effective Date (07-Augu 02-April-2012	ist-2008)
4. Are you the corresponding author?	Ye	s No		esponding Author's Na inia Moyer	me	
5. Manuscript Title Counseling to Prevent Skin Cancer		process to the second to the s	1900 ye w 2 MARIN W 2013 N. S.			
6. Manuscript Identifying Number (if you	ı know it)					
	office is the second with the second	a relativistica proportion significant successive aller aller and successive aller aller	AND THE STEEL STEE			
Section 2. The Work Under	Conside	ration for I	Publicatio	n		
Did you or your institution at any tim	ne receive r	navment or s	ervices fron	a third party for any	aspect of the submitted	work
(including but not limited to grants,	data monit	oring board	, study desig	yn, manuscript prepa	ration, statistical analysis	, etc):
Complete each row by checking "No "Add" button to add a row. Excess ro	or provid ows can be	removed by	ested inforr clicking the	nation. If you have n e "X" button.	nore than one relationshi	p click the
The Work Under Consideration	.,					
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Provision of writing assistance, medicines, equipment, or	V					×
administrative support	414	. 018 B.D.	The same			



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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.

Relevant financial activities ou	ıtside th	e submit	ted work			200
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership	V					×
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3. Employment	25 / 18 V	. □ L				×
4. Expert testimony	V					×
5. Grants/grants pending	V					× ADD
Payment for lectures including service on speakers bureaus						×
7. Payment for manuscript preparation		· · ·				×

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

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



Relevant financial activities ou	tside th	e submitt	ted work	See 1 4 2 11		T and
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
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Section 4. Other relation	ships					W. 1200
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No other relationships/condition Yes, the following relationships.					est	
At the time of manuscript acceptan On occasion, journals may ask auth	ice, journa ors to dis	als will ask close furth	authors to coner information	nfirm and, if necessary, u about reported relation	apdate their disclosure stanships.	atement
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1. Given Name (First Name) Mark	Surname (Last Name)Ebell	3. Effective Date (07-August-2008
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Virginia Moyer
5. Manuscript Title Counseling to Prevent Skin Cancer		

Section 2. The Work Under Consideration for Publication

Ebell

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



The Work Under Consid	leration for Pub	lication	A will be	A STANKE OF	TWEET STATE	
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
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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.

4	You	Institution*	Entity	Comments
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^{*} This means money that your institution received for your efforts on this study.

^{**} 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	
						ADD
8. Patents (planned, pending or issued)	Z					×
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9. Royalties	X					×
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 Payment for development of educational presentations 	X					*
						ADD
11. Stock/stock options	X					×
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12. Travel/accommodations/ meeting expenses unrelated to activities listed**	X					×
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13. Other (err on the side of full disclosure)	Z					×
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* This means money that your institution ** For example, if you report a consultant	received	for your eff	forts.	wel related to that consul	tancy on this line	

Section 4. Other relationships

Are there 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?

No other relationships/conditions/circumstances that present a potential conflict of interest Yes, the following relationships/conditions/circumstances are present (explain below):

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Ebell 5



Section 1. Ider	ntifying Infor	mation	12/12/	
1. Given Name (First Nam Wanda	ne)	2. Surnar Nicholso	ne (Last Name) on	3. Effective Date (07-August-200
4. Are you the correspond	ding author?	Yes	✓ No	Corresponding Author's Name Virginia Moyer
5. Manuscript Title Counseling to Prevent	Skin Cancer			
Counseling to Prevent 6. Manuscript Identifying		know it)		

Section 2. The Work Under Consideration for Publication

Nicholson

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



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Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
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* This masses managethat your	X					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.

Type of Relationship (in alphabetical order)	No	Money Paid to	Money to Your	Entity	Comments	
STATE OF STREET AND IN STREET		You	Institution*		New Park	Į
1. Board membership	LX.					ı
2. Consultancy	X					L
3. Employment	A					
5. Employment	40					
4. Expert testimony						i
	7					
5. Grants/grants pending						
	7		_			
6. Payment for lectures including						
service on speakers bureaus	X					
7. Payment for manuscript						F
preparation	M					

Nicholson 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	submit	ted work		A PARTY NAMED IN	
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
8. Patents (planned, pending or	Ò					P
issued)	4	Ш				
9. Royalties	L					A
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Payment for development of educational presentations	A					
						A
11. Stock/stock options	7					
Travel/accommodations/ meeting expenses unrelated to activities listed**	A					A
2 01 (1					Α
Other (err on the side of full disclosure)	X					
* This means money that your institution ** For example, if you report a consultance Section 4. Other relationsh	y above t			related to that consul	tancy on this line.	A

potentially influencing, what you wrote in the submitted work?

No other relationships/conditions/circumstances that present a potential conflict of interest Yes, the following relationships/conditions/circumstances are present (explain below):

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.

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W. Micholson

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Nicholson 5

Section 1.	Identifying Infor	mation	CAN TOT STOLE	
1. Given Name (F Doug	irst Name)	2. Surname (Last Name) Owens		3. Effective Date (07-August-2008)
4. Are you the co	rresponding author?	☐ Yes ✓ No	Corresponding Author's Na Virginia Moyer	ame
5. Manuscript Tit Counseling to P	le Prevent Skin Cancer			
6. Manuscript Ide	entifying Number (if you	know it)		

Section 2. The Work Under Consideration for Publication

Owens

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	Transit To		of the over 1	
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	X					×
2. Consulting fee or honorarium	K					ADD ×
3. Support for travel to meetings for the study or other purposes	W.	B		Task Fora /	AMO	* ADD
 Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like 						×
5. Payment for writing or reviewing the manuscript						ADD
Provision of writing assistance, medicines, equipment, or administrative support						ADD



The Work Under Consideration for Publication							
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**		
						ADD	
7. Other	4					×	
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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.

Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
. Board membership	Ø					
. Consultancy						A
. Employment						A
. Expert testimony						A
. Grants/grants pending						A
. Payment for lectures including service on speakers bureaus	M					
. Payment for manuscript preparation						Α

^{*} 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			Z W
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
						ADD
Patents (planned, pending or issued)						×
						ADD
9. Royalties	X					×
						ADD
Payment for development of educational presentations	X					×
						ADD
11. Stock/stock options	Ø					×
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12. Travel/accommodations/ meeting expenses unrelated to activities listed**	Ø					×
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13. Other (err on the side of full disclosure)	A					×
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* This means money that your institution ** For example, if you report a consultant				avel related to that consult	tancy on this line.	

Section 4. Other relationships

Are there 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?

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

Yes, the following relationships/conditions/circumstances are present (explain below):

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.

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Owens 5



Section 1.	Identifying Infor	mation		
1. Given Name (F Linda	irst Name)	2. Surname (Last Name) Baumann	r.	3. Effective Date (07-August-2008)
4. Are you the co	rresponding author?	Yes 🗸 No	Corresponding Author's Nan Virginia Moyer	ne
5. Manuscript Titl Counseling to P	e revent Skin Cancer			
6. Manuscript Ide	ntifying Number (if you	know it)		

Section 2. The Work Under Consideration for Publication

Baumann

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 t	or Pub	lication		The Market	通数 发达 扩展	
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	T					×
						ADD
2. Consulting fee or honorarium						×
						ADD
3. Support for travel to meetings for the study or other purposes	由					×
and study or other purposes						ADD
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	-					×
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5. Payment for writing or reviewing the manuscript	ф					×
						ADD
Provision of writing assistance, medicines, equipment, or administrative support	—					×



The Work Under Consideration for Publication							
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**		
	/	in i	'			ADD	
7. Other						×	
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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 activities out	side the	e submitt	ted work			240
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership	4					×
2. Consultancy	+					ADD
3. Employment						×
4. Expert testimony						ADD X ADD
5. Grants/grants pending						×
Payment for lectures including service on speakers bureaus	4					ADD X
7. Payment for manuscript preparation	4					×

Baumann 3

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

^{**} 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
8. Patents (planned, pending or	· ·				
issued)	H				
9. Royalties	ф				
O. Downstandard Lands					
Payment for development of educational presentations	P				
11. Stock/stock options					
2. Travel/accommodations/ meeting expenses unrelated to activities listed**	F				
3. Other (err on the side of full					
disclosure)	4				
* This means money that your institution ** For example, if you report a consultand				avel related to that consult	tancy on this line.
Section 4. Other relationship	nips				

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Baumann 4

Ruela Bum

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Given Name (First Name)	2. Surname (Last Name)	3. Effective Date (07-August-2008
Jessica	Herzstein	
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name
		Virginia Moyer
5. Manuscript Title		
Counseling to Prevent Skin Cancer		

Section 2. The Work Under Consideration for Publication

Herzstein

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 t	or Pub	lication				360
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	V					×
	7					ADD
2. Consulting fee or honorarium						×
						ADD
Support for travel to meetings for the study or other purposes						×
						ADD
 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 						×



The Work Under Consideration for Publication							
Туре	No	Money Paid to You	Money to Your Institution*		Comments**		
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Section 3. Relevant financial activities outside the submitted work.

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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						×
2. Consultancy						ADD X ADD
3. Employment						× ADD
4. Expert testimony						× ADD
5. Grants/grants pending	7					× ADD
Payment for lectures including service on speakers bureaus						×
7. Payment for manuscript preparation						ADD

Herzstein 3

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

^{**} 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	
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. Stock/stock options	B.					ADI
. Travel/accommodations/ meeting expenses unrelated to activities listed**						ADI *
. Other (err on the side of full disclosure)						ADI
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Herzstein



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Evaluation and Feedback

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Herzstein 5



Given Name (First Name) Albert	2. Surnar Siu	ne (Last Name)	3. Effective Date (07-August-200 05-April-2012
4. Are you the corresponding author?	Yes	✓ No	Corresponding Author's Name Virginia Moyer
5. Manuscript Title Screening for Skin Cancer			

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 Considerati	on for Pub	lication				
Туре	No	Paid	Money to Your Institution*	Name of Entity	Comments**	

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Relevant financial activities outside the submitted work

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



evant financial activities o	utside th	e submit	ted work	to the fa	
Type of Relationship (in alphabetical order)	No	Paid to	Money to Your Institution*	Entity	Comments
Type of Relationship (in alphabetical order)	No	Money Paid to You		Entity	Comments

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

Section 4.	Other relationships
	relationships or activities that readers could perceive to have influenced, or that give the appearance of lencing, what you wrote in the submitted work?
✓ No other rel	ationships/conditions/circumstances that present a potential conflict of interest
Yes, the follo	owing relationships/conditions/circumstances are present (explain below):
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