Section 1.	Identifying Info	ormation	
Given Name (F Virginia	irst Name)	2. Surname (Last Name) Moyer	3. Effective Date (07-August-2008)
4. Are you the co	rresponding author?	✓ Yes No	
5. Manuscript Tit Screening for Co	le ognitive Impairment		
6. Manuscript Ide	entifying Number (if yo	ou 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						×					
2. Consulting fee or honorarium	9					ADD X					
Support for travel to meetings for the study or other purposes		9				ADD ×					
						ADD					
<ol> <li>Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like</li> </ol>						×					
						ADD					
<ol><li>Payment for writing or reviewing the manuscript</li></ol>						×					
						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						×				
* Th:						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.

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

<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 outside the submitted work									
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments				
		/				ADD			
Patents (planned, pending or issued)	0					×			
						ADD			
9. Royalties						×			
						ADD			
10. Payment for development of educational presentations	0					×			
	,					ADD			
11. Stock/stock options	2					×			
						ADD			
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	2					×			
		/		*		ADD			
13. Other (err on the side of full disclosure)						×			
*This means money that your institution	racelyed	for your off	orts			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'

SAVE

<sup>\*\*</sup> For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.

Section 1. Identifying Inform	nation	
1. Given Name (First Name) Virginia	2. Surname (Last Name) Moyer	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Screening for Cognitive Impairment		
6. Manuscript Identifying Number (if you k	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...)?

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 for Publication										
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**					
1. Grant					The State Company of the Color Section Section (1997).	X				
2. Consulting fee or honorarium	0					ADD X				
3. Support for travel to meetings for the study or other purposes		2				ADD ×				
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like						ADD				
5. Payment for writing or reviewing the manuscript						ADD X				
Provision of writing assistance, medicines, equipment, or administrative support						ADD				
Moyer						2				

2

The Work Under Consideration for Publication										
	Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
7. Other							ADD ×			
× <b>-</b> 1 •							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.

Relevant financial activities outside the submitted work									
Type of Relationsl alphabetical ord		Mono Paid You	to Your	Entity	Comments				
1. Board membership									
2. Consultancy	Ĺ				ADD ADD				
3. Employment									
4. Expert testimony	-				ADD				
5. Grants/grants pendi	ng [				ADD X				
6. Payment for lectures service on speakers be					ADD XX				
7. Payment for manusc preparation	ript				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.



Re	Relevant financial activities outside the submitted work											
	Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments						
8	. Patents (planned, pending or issued)	4					ADD %					
9.	Royalties						ADD					
10	. Payment for development of educational presentations						ADD					
11	. Stock/stock options						ADD X ADD					
12	. Travel/accommodations/ meeting expenses unrelated to activities listed**	4					X					
13	. Other (err on the side of full disclosure)						ADD X					
							ADD					

## 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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Section 4.

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

<sup>\*\*</sup> For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.

Section 1. Identifying Information	
1. Given Name (First Name)  2. Surname (Last Name)  4. Are you the corresponding author?  Yes V No	3. Effective Date (07-August-2008)  \[ \begin{align*} align
5. Manuscript Title Screening for Cognitive Impairment	
6. Manuscript Identifying 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			•	•
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	X				The second secon	×
2. Consulting fee or honorarium						ADD X
Support for travel to meetings for the study or other purposes	Ø					×
4. 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	X					ADD ×

The Work Under Consideration for Publication							
Type	No	Money Paid to You		Name of Entity	Comments**		
7. Other	$\boxtimes$					ADD X ADD	

## Section 3. Relevant financial activities outside the submitted work.

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Relevant financial activities ou	tside th	e submitt	ted work		
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
1. Board membership	$\boxtimes$				× .
2. Consultancy	$\boxtimes$				ADD ADD
3. Employment	$\checkmark$				×
4. Expert testimony	X				ADD ×
5. Grants/grants pending	X				ADD X
Payment for lectures including service on speakers bureaus	X		. 🗆		ADD ADD
7. Payment for manuscript preparation	Š				·

<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	
		то в турово на применения в приме	200 mm and			A CONTRACTOR OF THE STREET		ADE
<ol><li>Patents (planned, pending or issued)</li></ol>	R							×
9. Royalties	[ <del>[</del> ]							ADE
o. noyaldes	K,							X ADE
Payment for development of educational presentations	X							×
	_							ADI
11. Stock/stock options	K			•				×
12. Travel/accommodations/								ADI
meeting expenses unrelated to activities listed**				٠.				×
12 Ohnor/om om the cide of full								ADE
<ol> <li>Other (err on the side of full disclosure)</li> </ol>	Z							X ADI

#### 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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SAVE

Section 1. Identifying Inform	nation	
<ol> <li>Given Name (First Name)</li> <li>Are you the corresponding author?</li> </ol>	2. Surname (Last Name)  Subbuse Down,  Yes No Corresponding Auth Virginia Moyer	3. Effective Date (07-August-2008) ors-Name
<ul><li>5. Manuscript Title</li><li>Screening for Cognitive Impairment</li><li>6. Manuscript Identifying Number (if you k</li></ul>	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 Publication								
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
1. Grant	Ø					×		
2. Consulting fee or honorarium	Ø					ADD × ADD		
3. Support for travel to meetings for the study or other purposes						×		
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	Ď					ADD ×		
5. Payment for writing or reviewing the manuscript						ADD ×		
Provision of writing assistance, medicines, equipment, or administrative support				•		ADD ×		

The Work Under Consider	ation for Pub	lication				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
7. Other	Ø					ADD X 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	X				*			
2. Consultancy	χŹ				ADD			
3. Employment	H				Abla			
4. Expert testimony	Ø			. ,	Apia			
5. Grants/grants pending				American Hos NIH	the state of the s			
6. Payment for lectures including service on speakers bureaus	-			CDC	ADD			
7. Payment for manuscript preparation	$\square$				Aple			

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<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)						
. Royalties						
. Payment for development of educational presentations			$\boxtimes$	one time & course for	prdemiology Genentech	-
. Stock/stock options				Ro	she.	
Travel/accommodations/ meeting expenses unrelated to activities listed**						
Other (err on the side of full disclosure)						
his means money that your institutior For example, if you report a consultan	received t	or your effe	orts.	traval raioto d to the s	author and the P	1

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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Hide All Table Rows Checked 'No'

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Water Dogs

1. Given Name (First Name)	2. Surname (Last Name)	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Virginia Moyer
5. Manuscript Title Screening for Cognitive Impairment		

#### 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	9			, 10 22 10 10 10 10 10 10 10 10 10 10 10 10 10		×		
2. Consulting fee or honorarium						ADD X ADD		
Support for travel to meetings for the study or other purposes	9					×		
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	<u> </u>					ADD ×		
5. Payment for writing or reviewing the manuscript	O C					ADD ×		
Provision of writing assistance, medicines, equipment, or administrative support						ADD ×		

The Work Under Consideration f	or Pub	lication			<u> </u>	
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
7. Other						ADD X 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	Q					<b>'</b>		
2. Consultancy					AC >	<b>'</b>		
3. Employment						<b>'</b>		
4. Expert testimony						OD <		
5. Grants/grants pending				,	>	OD <		
Payment for lectures including service on speakers bureaus					>	)D <		
7. Payment for manuscript preparation	4				. AE	OD K		

<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 the	submit	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You		Entity	Comments	
		,				ADD
8. Patents (planned, pending or issued)						×
						ADD
9. Royalties						×
10. Dayment for development of	/					ADD
<ol><li>Payment for development of educational presentations</li></ol>	V					×
		_				ADD.
11. Stock/stock options	U					×
		,				ADD
<ol> <li>Travel/accommodations/ meeting expenses unrelated to activities listed**</li> </ol>	4					*
						ADD
<ol><li>Other (err on the side of full disclosure)</li></ol>	U					×
						ADD

Section 4.

# 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' SAVE

William R. FRELLERS

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<sup>\*\*</sup> For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.

Section 1. Identifying In	formation	
1. Given Name (First Name)  Hichael	2. Surname (Last Name)	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Virginia Moyer
5. Manuscript Title Screening for Cognitive Impairmen	nt .	
6. Manuscript Identifying Number (if y	ou 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				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant						×
2. Consulting fee or honorarium	$\leq$					ADD X ADD
3. Support for travel to meetings for the study or other purposes						×
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like						ADD X
5. Payment for writing or reviewing the manuscript						ADD X
Provision of writing assistance, medicines, equipment, or administrative support				•		ADD ×

The Work Under Conside	ration for Pub	lication				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
7. Other						ADD X ADD

#### Section 3. Relevant financial activities outside the submitted work.

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Relevant financial activities out	side th	e submitt	ed work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership	2					X ADB
2. Consultancy						
3. Employment						ADD X
4. Expert testimony						ADD.
5. Grants/grants pending		l	<u> </u>	multiple Feler	al and	A
Payment for lectures including service on speakers bureaus				multiple Felor - America Cun - Informed Mer Fundation	duel Decisio	ADD X
7. Payment for manuscript preparation						ADD X

<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 ssued)	v				
Royalties				text look chop	tons a
Payment for development of educational presentations				· · ·	
Stock/stock options					
Travel/accommodations/ meeting expenses unrelated to activities listed**		1		meeting on ar preveting - Ton for Prevent	Piri tranship
Other (err on the side of full disclosure)				for Prevent	Lui
nis means money that your institution or example, if you report a consultanc	received	for your effo here is no r	orts. need to report t	ravel related to that consultan	ry on this line

Section 4. Other rela	ationships		
Are there other relationships of potentially influencing, what y	or activities that readers could pe you wrote in the submitted work	erceive to have influenced, or c?	that give the appearance of
	nditions/circumstances that pres ships/conditions/circumstances		rest
At the time of manuscript acco On occasion, journals may ask	eptance, journals will ask authors authors to disclose further infor	s to confirm and, if necessary, mation about reported relatio	update their disclosure statements. nships.

SAVE

Hide All Table Rows Checked 'No'

1. Given Name (Fi	irst Name)	2. Surnar	ne (Last Name)	***	3. Effective Date (07-August-2008)
4. Are you the cor	rresponding author?	Yes	✓ No	Corresponding Author's Na Virginia Moyer	me
5. Manuscript Title Screening for Co	e ognitive Impairment				

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

The Work	Under Consideration	for Pub	lication				
	Type	No		Money to Your Institution*	Name of Entity	Comments**	
7. Other				·			ADD X 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	A				
Consultancy	ф				
Employment	ф				
. Expert testimony					
Grants/grants pending					
Payment for lectures including service on speakers bureaus					
. Payment for manuscript preparation					-

<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	
8. Patents (planned, pending or	<b>√</b> √]					AE
issued)						>
9. Royalties				·		AD ×
Payment for development of educational presentations	4					AD ×
1. Stock/stock options	ф					AD ×
2. Travel/accommodations/ meeting expenses unrelated to activities listed**					and the second second	AD X
3. Other (err on the side of full disclosure)						AD X
meeting expenses unrelated to activities listed**  13. Other (err on the side of full						

## 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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Hide All Table Rows Checked 'No'

SAVE

1. Given Name (First Name)	2. Surnar	me (Last Name)	-e	3. Effective Date (07-August-2008)
Are you the corresponding author?	Yes	✓ No	Corresponding Author's Na Virginia Moyer	nme
5. Manuscript Title Screening for Cognitive Impairment				<del></del>
6. Manuscript Identifying 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...)?

The Work Under Consideration for Publication									
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**				
1. Grant	1					×			
2. Consulting fee or honorariur	m 🔀					ADD X			
3. Support for travel to meeting the study or other purposes	gs for					ADD ×			
4. Fees for participation in revie activities such as data monito boards, statistical analysis, er point committees, and the like	oring 🔽					ADD X			
5. Payment for writing or review the manuscript	wing					ADD X			
Provision of writing assistance     medicines, equipment, or     administrative support	ce,					ADD ×			

The Work Under Consideration for Publication								
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
7. Other	Ø					ADD X 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	Ø				×			
2. Consultancy	Ø				ADD ×			
3. Employment					× ADD			
4. Expert testimony					ADD ×			
5. Grants/grants pending					ADD X			
6. Payment for lectures including service on speakers bureaus	Ø		. 🗆		ADD ×			
7. Payment for manuscript preparation					. 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.

Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity		Comme	nts
Patents (planned, pending or issued)					•		AD ×
9. Royalties							AD ×
Payment for development of educational presentations						,	AD ×
1. Stock/stock options							AD X AD
2. Travel/accommodations/ meeting expenses unrelated to activities listed**	A						×
3. Other (err on the side of full disclosure)	9						AD ×
* This means money that your institution ** For example, if you report a consultand				avel related to tha	at consultand	cy on this line.	AD

		·		
Section 4.	Other relationships			
	r relationships or activities that reau uencing, what you wrote in the su		o have influenced, or that give the app	pearance of
No other re	lationships/conditions/circumsta	nces that present a pot	tential conflict of interest	
Yes, the foll	lowing relationships/conditions/c	ircumstances are prese	ent (explain below):	
	manuscript acceptance, journals wournals was authors to disclose		rm and, if necessary, update their disc	closure statements.

Hide All Table Rows Checked 'No'

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Section 1. Identifying	Information	
1. Given Name (First Name)	2. Surname (Last Name)  Herzstein	3. Effective Date (07-August-2008)
4. Are you the corresponding author	or? Yes No Corresponding Au Virginia Moyer	ithor's Name
5. Manuscript Title Screening for Cognitive Impairm	nent	
6. Manuscript Identifying Number (i	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 Publication								
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**			
1. Grant						×		
2. Consulting fee or honorarium						ADD X		
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						ADD ×		
5. Payment for writing or reviewing the manuscript						ADD X		
Provision of writing assistance, medicines, equipment, or administrative support	4					ADD ×		

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

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>a</b>			na watany ny haarana maraka 1960.		×		
2. Consultancy						ADD X ADD		
3. Employment						X		
4. Expert testimony	9					ADD X		
5. Grants/grants pending						ADD X		
Payment for lectures including service on speakers bureaus	Ø					ADD X		
7. Payment for manuscript preparation	V					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 the	submit	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
8. Patents (planned, pending or issued)						ADD X
9. Royalties	4					ADD X
Payment for development of educational presentations	y					ADD X
11. Stock/stock options	ď					ADD ×
12. Travel/accommodations/ meeting expenses unrelated to activities listed**						ADD ×
13. Other (err on the side of full disclosure)						ADĎ ×
* This means money that your institution ** For example, if you report a consultance	received f y above th	or your effo nere is no n	orts. need to report trave	related to that consulta	ancy on this line.	ADD
Section 4. Other relationsh	ips					

Section 4.	Other relationships				
Are there other re potentially influe	elationships or activities that ncing, what you wrote in the	readers could perceive submitted work?	to have influenced, or that give	the appearance of	
No other rela	tionships/conditions/circums	stances that present a p	otential conflict of interest		
	wing relationships/condition				
At the time of ma On occasion, jour	anuscript acceptance, journal rnals may ask authors to discl	ls will ask authors to con lose further information	afirm and, if necessary, update the about reported relationships.	eir disclosure statements.	•

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Section 1. Identifying Informa	tion	
1. Given Name (First Name)  Mark	2. Surname (Last Name)	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	Yes No Corresponding Author's No Virginia Moyer	Name
5. Manuscript Title Screening for Cognitive Impairment		
6. Manuscript Identifying Number (if you kno	w 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						×		
						ADD		
2. Consulting fee or honorarium						×		
2.6						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			· [_]			×		
point committees, and the like						ADD		
5. Payment for writing or reviewing						×		
the manuscript	لط							
6. Provision of writing assistance,				•		ADD		
medicines, equipment, or	$\square$					×		
administrative support			0	1				

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

#### Section 3. Relevant financial activities outside the submitted work.

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

	1.5	Money	Money to			
Type of Relationship (in alphabetical order)	No	Paid to You	Your Institution*	Entity	Comments	
8. Patents (planned, pending or						ADD ×
issued)						ADD
9. Royalties	Z					X ADD
10. Payment for development of educational presentations						×
11. Stock/stock options						ADD X ADD
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	Ø					×
13. Other (err on the side of full disclosure)	Ø					X
* This means money that your institution ** For example, if you report a consultant				vel related to that cons	sultancy on this line.	
Section 4. Other relations	hins	· · · · · · · · · · · · · · · · · · ·		e .		
Other relations	nips					

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.

Hide All Table Rows Checked 'No'

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

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

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1. Given Name (F	•	2. Surnam	ne (Last Name)		· 3. E	ffective Date (07-Au	gust-2008)
Sus	SAN	COK	CKY		10.0		
4. Are you the co	rresponding author?	Yes	<b>√</b> No	Corresponding Au	thor's Name		
				Virginia Moyer			
5. Manuscript Titl	e ognitive Impairment						

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

The Work (	Under Consideration (	or Pub	lication				
	Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
7. Other		4					ADD 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.

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					× ADD					
2. Consultancy	ф				× ADD					
3. Employment	ф		1		×					
4. Expert testimony					×					
5. Grants/grants pending	ф				×					
Payment for lectures including service on speakers bureaus					ADD ADD					
7. Payment for manuscript preparation				·	×					

<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	
3. Patents (planned, pending or issued)	T					AD ×
. Royalties	ф					AD X
Payment for development of educational presentations						AD ×
. Stock/stock options	4					AD ×
2. Travel/accommodations/ meeting expenses unrelated to activities listed**						AD ×
. Other (err on the side of full disclosure)	ф		<sup>1</sup> .			AD ×
This means money that your institution For example, if you report a consultance				el related to that consu	Itancy on this line.	AD
		,	٠.		•	
Section 4. Other relations	nips					
re there other relationships or activ otentially influencing, what you wro				nave influenced, or th	nat give the appearance o	of

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'

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

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Section 1. Identifying Inform	nation	
1. Given Name (First Name) AdeliTA	2. Surname (Last Name)	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	☐ Yes   ✓ No	Corresponding Author's Name Virginia Moyer
5. Manuscript Title Screening for Cognitive Impairment		
6. Manuscript Identifying Number (if you k	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 Publication								
Type	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	9					×		
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like						ADD ×		
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**			
7. Other						ADD X 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					A	× nn		
2. Consultancy						X		
3. Employment						X		
4. Expert testimony					.A	.DD ×		
5. Grants/grants pending					<b>,</b>	DD X		
Payment for lectures including service on speakers bureaus					<u>.</u>	DD X		
7. Payment for manuscript preparation					A	DD ×		

<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)	Ė					1
Royalties						•
Payment for development of educational presentations	9					
Stock/stock options	9					<i>,</i>
Travel/accommodations/ meeting expenses unrelated to activities listed**	<b>U</b>					P
Other (err on the side of full disclosure)	7					,,
his means money that your institution For example, if you report a consultanc	received t	for your effo	orts.	related to that con-	lton ou on ship line	1

C	ortic	on 4.			
i	CCII		Other	relationsh	in

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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Section 1. Identifying Inform	mation	an Salaka ka	LANGER DESCRIPTION	E LANGE LANG
1. Given Name (First Name) Francis CO		e (Last Name)	3. Effective Da	ate (07-August-2008)
4. Are you the corresponding author?	Yes	<b>√</b> No	Corresponding Author's Name Virginia Moyer	
5. Manuscript Title Screening for Cognitive Impairment		10 24	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	
6. Manuscript Identifying Number (if you k	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				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	中					X ADD
2. Consulting fee or honorarium	$\varphi$					X ADD
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	F			a 11	## I	×
5. Payment for writing or reviewing the manuscript	h					×
Provision of writing assistance, medicines, equipment, or administrative support	+					×

The Work	CUnder Consider	ration for Pub	lication				
	Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
		-					ADD
7. Other		仚					×
							ADD.

#### Section 3. Relevant financial activities outside the submitted work.

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Relevant financial activities out	side the	e submitt	ed work		Expension Still	
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
Board membership	中					X ADD
2. Consultancy	ф					X ADD
3. Employment	ф			9		×
4. Expert testimony	ф			*		X
5. Grants/grants pending	ф					×
Payment for lectures including service on speakers bureaus	+		. 🗆			ADD X
7. Payment for manuscript preparation	4				,	X

<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 outs	ide th	e submit	ted work		P25400000100000000
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments
Patents (planned, pending or issued)					A
9. Royalties					A
Payment for development of educational presentations				*	A
11. Stock/stock options	中				· A
Travel/accommodations/ meeting expenses unrelated to activities listed**	#				Ā
Other (err on the side of full disclosure)	þ				A
*This means money that your institution **For example, if you report a consultance  Section 4.  Other relations	cy above			vel related to that con	
Are there other relationships or activ potentially influencing, what you wro				have influenced, or	that give the appearance of
No other relationships/conditions Yes, the following relationships/c		**			erest
At the time of manuscript acceptance On occasion, journals may ask author	e, journ rs to dis	als will ask close furth	authors to conf ner information a	irm and, if necessary about reported relati	, update their disclosure statem ionships.
Hide All Ta	ble Rov	vs Checke	ed 'No'	SAVE	



Section 1. Identifying Infor	mation (186	CONTRACTAL STREET, STR
1. Given Name (First Name)	2. Surname (Last Name)	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Virginia Moyer
5. Manuscript Title Screening for Cognitive Impairment	*	
6. Manuscript Identifying 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...)?

The Work Under Consideration f	or Pub	lication			1000年1200年1	
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	中				*	×
2. Consulting fee or honorarium	$\phi$					X ADD
Support for travel to meetings for the study or other purposes	þ					×
Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	P					X X
Payment for writing or reviewing the manuscript	þ					ADD X
Provision of writing assistance, medicines, equipment, or administrative support						ADD ×

The Work	Under Conside	ration for Pub	lication			Grade Grade Control	Children &
	Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
7. Other							ADD 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.

Relevant financial activities out	side the submitted work					
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership	P					×
2. Consultancy	ф					ADD X
3. Employment	ф			*	\$P	ADD X
4. Expert testimony	þ					ADD X
5. Grants/grants pending	þ					ADD X
Payment for lectures including service on speakers bureaus						ADD ×
Payment for manuscript preparation					8 <sup>8</sup> .	ADD X

<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 ssued)	P				
Royalties	ф				
Payment for development of educational presentations	$\frac{1}{2}$				
Stock/stock options	ф			20	
Travel/accommodations/ meeting expenses unrelated to activities listed**	+				
Other (err on the side of full disclosure)					
is means money that your institution	n received	for your efforthere is no n	orts. leed to report trave	el related to that consult	ancy on this line.

Section 4.	Other relationships
Are there other potentially influ	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
	owing relationships/conditions/circumstances are present (explain below):
At the time of m	IANUSCRINT acceptance journals will ask authors to confirm and if possessor, undate their disclosure statement

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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Section 1. Identifying Infor	rmation				
Given Name (First Name) Rosanne	2. Surname (Last Name) Leipzig	3. Date 11-March-2014			
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Virginia Moyer			
5. Manuscript Title Screening for Cognitive Impairment i	n Older Adults: U.S. Preventi	tive Services Task Force Recommendation Statement			
6. Manuscript Identifying Number (if you	know it)				
Section 2. The Work Under	Consideration for Publi	cation			
	ing but not limited to grants, da	a a third party (government, commercial, private foundation, etc.) fo ata monitoring board, study design, manuscript preparation,			
Section 3. Relevant financia	al activities outside the	submitted work.			
of compensation) with entities as des	cribed in the instructions. U 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.			
Section 4. Intellectual Prop	erty Patents & Copyri	ghts			
Do you have any patents, whether pla	anned, pending or issued, b	roadly relevant to the work? Yes V No			



d perceive to have influence ork? ces are present (explain be present a potential conflict	
With the season	
oresent a potential conflict	of interest
	of interest
	essary, update their disclosure statement I relationships.
	<b>成已经一张的人</b> 是有关的
y generate a disclosure sta	ntement, which will appear in the box
The second secon	nformation about reported

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