

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

Identifying information.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

Relationships not covered above.

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

Silk 1



| Section 1. | Identifying Inform | ation | | | | |
|---|---|---|-----------------------------|----------------------------|-----------------------|------------------------|
| 1. Given Name (First Rachel | , , | 2. Surname (Last I Silk | Name) | | 3. Date 20-August- | -2014 |
| 4. Are you the corresponding author? | | Yes ✓ No | o Correspon S. Kottilil, | ding Author's N MD, PhD | Name | |
| 5. Manuscript Title Retreatment of HC | V Genotype-1 with So | ofosbuvir and Led | ipasvir after Relapse | e with Sofosbu | uvir and Ribavi | irin: A Pilot Study |
| 6. Manuscript Identi | fying Number (if you kn | ow it) | | | | |
| | | | | | | |
| Section 2. | The Work Under Co | onsideration fo | r Publication | | | |
| any aspect of the sub | Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? | | | | | |
| If yes, please fill ou | | ormation below. If | No you have more thar | n one entity p | oress the "ADD' | " button to add a row. |
| Name of Institutio | | Grant? Person | | Other? C | omments | |
| Gilead Sciences, Inc | | | | ✓ CRA | ADA | |
| | | | | | | |
| Section 3. | Relevant financial a | activities outsic | le the submitted | work. | | |
| of compensation) v clicking the "Add + | e appropriate boxes in with entities as descri " box. You should rep rant conflicts of intere | bed in the instruct port relationships t | tions. Use one line f | or each entity | ; add as many | lines as you need by |
| | | | | | | |
| Section 4. | ntellectual Proper | ty Patents & C | Copyrights | | | |
| Do you have any p | atents, whether planr | ned, pending or is: | sued, broadly releva | ant to the wor | rk? Yes | ✓ No |

Silk 2



| Section 5. Polationships not sovered above |
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| Relationships not covered above |
| 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? |
| Yes, the following relationships/conditions/circumstances are present (explain below): |
| ✓ No other relationships/conditions/circumstances that present a potential conflict of interest |
| 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. |
| Section 6. Disclosure Statement |
| Disclosure Statement |
| Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below. |
| Dr. Silk reports other from Gilead Sciences, Inc, during the conduct of the study; . |

Evaluation and Feedback

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Silk 3



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Townsend 1



| Section 1. Identifying Information | | | | |
|---|--|--|--|--|
| 1. Given Name (First Name) 2. Surname (Last Name) 3. Date Kerry Townsend 20-August-2014 | | | | |
| 4. Are you the corresponding author? ✓ Yes No | | | | |
| 5. Manuscript Title Retreatment of HCV Genotype-1 with Sofosbuvir and Ledipasvir after Relapse with Sofosbuvir and Ribavirin: A Pilot Study | | | | |
| 6. Manuscript Identifying Number (if you know it) M14-1211 | | | | |
| | | | | |
| Section 2. The Work Under Consideration for Publication | | | | |
| Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes No | | | | |
| 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 publication . Are there any relevant conflicts of interest? Yes Vo | | | | |
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| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes V No | | | | |

Townsend 2



| Section 5. Relationships not covered above |
|--|
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| Ms. Townsend has nothing to disclose. |

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Pang 1



| Section 1. Identifying Inform | ation | | | |
|--|---|--|--|--|
| 1. Given Name (First Name) Phillip | 2. Surname (Last Name) Pang | 3. Date 20-August-2014 | | |
| 4. Are you the corresponding author? Yes | | Corresponding Author's Name Kottilil | | |
| 5. Manuscript Title Retreatment of HCV Genotype-1 with S | ofosbuvir and Ledipasvir a | fter Relapse with Sofosbuvir and Ribavirin: A Pilot Study | | |
| 6. Manuscript Identifying Number (if you kn | now it) | | | |
| | | - | | |
| Section 2. The Work Under Co | onsideration for Public | ation | | |
| Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes No If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button. | | | | |
| Name of Institution/Company | Grant | n-Financial other? Comments | | |
| Gilead Sciences | | ✓ Employee | | |
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| Section 3. Relevant financial | activities outside the s | ubmitted work. | | |
| of compensation) with entities as descri | bed in the instructions. Us port relationships that were est? | ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e present during the 36 months prior to publication . | | |
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Pang 2



| Section 4. Intellectual Property Patents & Copyrights |
|---|
| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes V |
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| I am an employee of Gilead Sciences, Inc. |

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Masur 1



| Section 1. Identifying Info | ormation | | |
|---|---|--|--|
| 1. Given Name (First Name) Henry | 2. Surname (Last Name) Masur | 3. Date 20-August-2014 | |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Shyam Kottilil | |
| 5. Manuscript Title Retreatment of HCV Genotype-1 wi | th Sofosbuvir and Ledipasvir a | fter Relapse with Sofosbuvir and Ribavirin: A Pilot Study | |
| 6. Manuscript Identifying Number (if yo M14-1211 | ou know it) | | |
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| Section 4. Intellectual Pro | | | |
| Intellectual Pro | perty Patents & Copyric | ints | |
| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo | | | |

Masur 2



| Section 5. Relationships not covered above |
|--|
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| Dr. Masur has nothing to disclose. |

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Masur 3



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Subramanian 1



| Section 1. Identifying Inform | ation | | | | |
|---|---------------------------------------|------------------------|---------------------------------------|-----|--|
| 1. Given Name (First Name) G Mani | 2. Surname (Last Name) Subramanian | | 3. Date 22-August-2014 | | |
| 4. Are you the corresponding author? | Yes ✓ No | Corresponding Author | or's Name | | |
| 5. Manuscript Title Retreatment of HCV Genotype-1 with So | ofosbuvir and Ledipasvir a | fter Relapse with Sofo | osbuvir and Ribavirin: A Pilot Study | | |
| 6. Manuscript Identifying Number (if you kn | ow it) | _ | | | |
| Section 2. The Work Under Co | ancidoration for Dublic | ration | | | |
| Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? | | | | | |
| Are there any relevant conflicts of intere If yes, please fill out the appropriate info Excess rows can be removed by pressing | ormation below. If you hav | e more than one enti | ty press the "ADD" button to add a re | ow. | |
| Name of Institution/Company | Grant | n-Financial other? | Comments | | |
| Gilead Sciences | | | Employee | | |
| Section 3. Polovant financial | | | | | |
| nelevant ilitaliciai activities outside the subinitted work. | | | | | |
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Subramanian 2



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|---------------------------|--|
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Royalties: Funds are coming in to you or your institution due to your patent

osinusi 1



| Section 1. Identifying Inform | nation | | | |
|---|--|--|--|--|
| 1. Given Name (First Name) anu | 2. Surname (Last Name) osinusi | 3. Date 26-August-2014 | | |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name shyam kottilil | | |
| 5. Manuscript Title Retreatment of HCV Genotype-1 with S | Sofosbuvir and Ledipasvir a | fter Relapse with Sofosbuvir and Ribavirin: A Pilot Study | | |
| 6. Manuscript Identifying Number (if you k M14-1211 | now it) | | | |
| | | | | |
| Section 2. The Work Under C | onsideration for Public | cation | | |
| | g but not limited to grants, da | a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation, | | |
| Section 3. Relevant financial | activities outside the s | submitted work. | | |
| of compensation) with entities as descri | ribed in the instructions. Us port relationships that wer | ether 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 Prope | rty Patents & Copyri | ghts | | |
| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo | | | | |

osinusi 2



| Section 5. Relationships not covered above |
|--|
| Relationships not covered above |
| 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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| Dr. osinusi has nothing to disclose. |

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osinusi 3



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Kohli 1



| Section 1. | Identifying Inform | nation | | |
|--|----------------------------|---|--|---|
| 1. Given Name (Fii Anita | rst Name) | 2. Surname (Last Name) Kohli | | 3. Date 29-August-2014 |
| 4. Are you the cor | responding author? | Yes ✓ No | Corresponding Author's Name | e |
| 5. Manuscript Title Retreatment of H | | ofosbuvir and Ledipasvir a | fter Relapse with Sofosbuvir | and Ribavirin: A Pilot Study |
| 6. Manuscript Ider | ntifying Number (if you kr | now it) | | |
| | | | _ | |
| Section 2. | The Work Under Co | onsideration for Public | cation | |
| any aspect of the s statistical analysis, | ubmitted work (including | g but not limited to grants, da | a third party (government, comi ta monitoring board, study desi | mercial, private foundation, etc.) for gn, manuscript preparation, |
| Section 3. | Relevant financial | activities outside the s | submitted work. | |
| of compensation clicking the "Add |) with entities as descri | ibed in the instructions. Us port relationships that wer | | ionships (regardless of amount d as many lines as you need by onths prior to publication. |
| Section 4. | Intellectual Proper | rty Patents & Copyric | yhts | |
| Do you have any | | | oadly relevant to the work? | ☐ Yes 🕡 No |

Kohli 2



| Section 5. | | | | |
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| Section 5. | Relationships not covered above | | | |
| | elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work? | | | |
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| 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. | | | | |
| Section 6. | Disclosure Statement | | | |
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| Dr. Kohli has not | thing to disclose. | | | |

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Royalties: Funds are coming in to you or your institution due to your patent

Marti 1



| Section 1. | Identifying Inform | nation | |
|--|--------------------------------------|---|--|
| 1. Given Name (Fii Miriam | rst Name) | 2. Surname (Last Name) Marti | 3. Date 09-August-2014 |
| 4. Are you the cor | 4. Are you the corresponding author? | | Corresponding Author's Name Shyam Kottilil |
| 5. Manuscript Title Retreatment of H | | ofosbuvir and Ledipasvir a | ofter Relapse with Sofosbuvir and Ribavirin: A Pilot Study |
| 6. Manuscript Ider | ntifying Number (if you kr | now it) | |
| | | | _ |
| Section 2. | The Work Under Co | onsideration for Public | cation |
| any aspect of the s statistical analysis, | ubmitted work (including | g but not limited to grants, da | a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation, |
| Section 3. | Relevant financial | activities outside the s | submitted work. |
| of compensation clicking the "Add |) with entities as descri | ibed in the instructions. Us port relationships that wer | ether 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 Proper | rty Patents & Copyric | ghts |
| Do you have any | | | oadly relevant to the work? Yes V No |

Marti 2



| Section 5. Relationships not covered above |
|--|
| Relationships not covered above |
| 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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Marti 3



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KOTTILIL 1



| Section 1. | Identifying Inform | ation | | | |
|---|----------------------------|--------------------------------|---|----------------|---|
| 1. Given Name (Fii SHYAM | en Name (First Name) M | | 2. Surname (Last Name) KOTTILIL | | 3. Date 20-August-2014 |
| 4. Are you the cor | responding author? | ✓ Yes | No | | |
| 5. Manuscript Title Retreatment of H | | ofosbuvir ar | nd Ledipasvir after Relapse with | h Sofosbuvir | and Ribavirin: A Pilot Study |
| 6. Manuscript Ider M14-1211 | ntifying Number (if you kr | ow it) | | | |
| | ı | | | | |
| Section 2. | The Work Under Co | onsiderati | on for Publication | | |
| Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes No | | | | | |
| Section 3. | Relevant financial | activities o | outside the submitted wor | rk. | |
| of compensation clicking the "Add | ı) with entities as descri | bed in the in port relation | nstructions. Use one line for each ships that were present durin | ach entity; ac | tionships (regardless of amount dd as many lines as you need by onths prior to publication. |
| Section 4. | Intellectual Proper | ty Paten | nts & Copyrights | | |
| Do you have any | patents, whether plan | ned, pendin | g or issued, broadly relevant to | o the work? | ☐ Yes 🗸 No |

KOTTILIL 2



| Section 5. Relationships not covered above |
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| 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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Meissner 1



| Section 1. Identifying | Information | |
|---|---|---|
| 1. Given Name (First Name) Eric | 2. Surname (Last Name) Meissner | 3. Date 20-August-2014 |
| 4. Are you the corresponding author | or? Yes ✓ No | Corresponding Author's Name |
| 5. Manuscript Title Successful Retreatment of HCV C | Genotype-1 Sofosbuvir and Ribavi | rin Failures with Sofosbuvir and Ledipasvir. |
| 6. Manuscript Identifying Number (M14-1211 | if you know it) | |
| | | |
| Section 2. The Work Ur | nder Consideration for Public | ation |
| | ncluding but not limited to grants, da | a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation, |
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| Section 4 | | |
| Section 4. Intellectual I | Property Patents & Copyrig | hts |
| Do you have any patents, wheth | er planned, pending or issued, br | oadly relevant to the work? Yes V No |

Meissner 2



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| Dr. Meissner has nothing to disclose. |

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Issued: The patent has been issued by the agency

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Royalties: Funds are coming in to you or your institution due to your patent

Fauci 1



| Section 1. Identifying Info | mation | | | |
|---|--|--|--|--|
| Given Name (First Name) Anthony | 2. Surname (Last Name) Fauci | 3. Date 23-August-2014 | | |
| 4. Are you the corresponding author? | Yes ✓ No | Corresponding Author's Name Shyam Kotillil | | |
| 5. Manuscript Title Retreatment of HCV Genotype-1 with | Sofosbuvir and Ledipasvir a | fter Relapse with Sofosbuvir and Ribavirin: A Pilot Study" | | |
| 6. Manuscript Identifying Number (if you M14-1211 | know it) | | | |
| | | | | |
| Section 2. The Work Under | Consideration for Public | cation | | |
| | ng but not limited to grants, da | a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation, | | |
| Section 3. Relevant financia | al activities outside the s | ubmitted work. | | |
| of compensation) with entities as des | cribed in the instructions. Us report relationships that wer — | ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by se present during the 36 months prior to publication. | | |
| Section 4. Intellectual Prop | | | | |
| Intellectual Prop | erty Patents & Copyric | hts | | |
| Do you have any patents, whether pla | anned, pending or issued, br | oadly relevant to the work? Yes V No | | |

Fauci 2



| Soction F | |
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| Section 5. | elationships not covered above |
| | tionships or activities that readers could perceive to have influenced, or that give the appearance of ng, what you wrote in the submitted work? |
| Yes, the followin | g relationships/conditions/circumstances are present (explain below): |
| ✓ No other relation | nships/conditions/circumstances that present a potential conflict of interest |
| | script acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements Is may ask authors to disclose further information about reported relationships. |
| Section 6. Di | isclosure Statement |
| Based on the above below. | disclosures, this form will automatically generate a disclosure statement, which will appear in the box |
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Fauci 3



Instructions

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Identifying information.

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3. Relevant financial activities outside the submitted work.

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Royalties: Funds are coming in to you or your institution due to your patent

Nelson 1



| Section 1. Identif | ying Information | | | | |
|---|--|---|--|----------------------|--|
| 1. Given Name (First Name) Amy | 2. Surname (Nelson | (Last Name) | 3. Date 25-August | :-2014 | |
| 4. Are you the correspondin | g author? Yes | | Corresponding Author's Name Anu Osinusi, MD MPH | | |
| 5. Manuscript Title Retreatment of HCV Geno | type-1 with Sofosbuvir and | Ledipasvir after Relapse | e with Sofosbuvir and Ribav | virin: A Pilot Study | |
| 6. Manuscript Identifying Nu M14-1211 | mber (if you know it) | | | | |
| | | | | | |
| Section 2. The Wo | ork Under Consideration | n for Publication | | | |
| any aspect of the submitted statistical analysis, etc.)? Are there any relevant cor If yes, please fill out the ap | any time receive payment or work (including but not limited of limited for the state of the stat | d to grants, data monitorin No w. If you have more than | g board, study design, manusc | cript preparation, | |
| Name of Institution/Com | pany Grant• | rsonal Non-Financial Fees? Support? | Other? Comments | | |
| Gilead Sciences, Inc. | | | ✓ CRADA | | |
| | | | | | |
| Section 3. Releva | nt financial activities ou | utside the submitted | work. | | |
| of compensation) with en clicking the "Add +" box. \ Are there any relevant cor | priate boxes in the table to tities as described in the ins 'ou should report relationsh nflicts of interest? Yes | structions. Use one line f nips that were present c | or each entity; add as many | lines as you need by | |
| Section 4. Intelle | ctual Property Patent | s & Copyrights | | | |
| Do you have any patents, | whether planned, pending | or issued, broadly releva | ant to the work? Yes | ✓ No | |

Nelson 2



| Section 5. Polationships not sovered above |
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| Relationships not covered above |
| 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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| Section 6. Disclosure Statement |
| Disclosure Statement |
| Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below. |
| Ms. Nelson reports other from Gilead Sciences, Inc., during the conduct of the study; . |

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Nelson 3



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McHutchison 1



| Section 1. | Identifying Inform | nation | | | | |
|---|---|---------------------------------------|----------------------|---|--|--|
| 1. Given Name (First Name) John | | 2. Surname (Last Name) McHutchison |) | 3. Date 14-August-2014 | | |
| 4. Are you the corresponding author? | | ☐ Yes ✓ No | Corresponding Auth | or's Name | | |
| 5. Manuscript Title Retreatment of HCV Genotype-1 with Sofosbuvir and Ledipasvir after Relapse with Sofosbuvir and Ribavirin: A Pilot Study | | | | | | |
| 6. Manuscript Identifying Number (if you know it) M14-1211 | | | | | | |
| Section 2. | | | | | | |
| | | onsideration for Pub | | | | |
| Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? | | | | | | |
| • | Are there any relevant conflicts of interest? | | | | | |
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| 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 publication . | | | | | | |
| Are there any relevant conflicts of interest? Ves No | | | | | | |
| If yes, please fill o | out the appropriate info | ormation below. | | | | |
| Name of Entity | | Grant? Personal N | Ion-Financial Other? | Comments | | |
| Gilead Sciences, Inc. | | | | Dr. McHutchison is a stock holder and employee at Gilead Sciences, Inc. | | |
| | | | | | | |
| Section 4. | Intellectual Proper | rty Patents & Copy | rights | | | |
| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo | | | | | | |

McHutchison 2



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| Section 5. | Relationships not covered above | | | |
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McHutchison 3



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Zhang 1



| Section 1. Identifying Inform | nation | | | | |
|---|---------------------------------|---|--|--|--|
| 1. Given Name (First Name) Xiaozhen | 2. Surname (Last Name) Zhang | 3. Date 26-August-2014 | | | |
| 4. Are you the corresponding author? | Yes Vo | Corresponding Author's Name Shyam Kottilil | | | |
| 5. Manuscript Title Retreatment of HCV Genotype-1 with Sofosbuvir and Ledipasvir after Relapse with Sofosbuvir and Ribavirin: A Pilot Study | | | | | |
| 6. Manuscript Identifying Number (if you know it) M14-1211 | | | | | |
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| Section 2. The Work Under C | onsideration for Public | cation | | | |
| Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes No | | | | | |
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| Section 4. Intellectual Prope | rty Patents & Copyric | ghts | | | |
| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo | | | | | |

Zhang 2



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| Section 5. | elationships not covered above | | | |
| 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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Zhang 3