

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

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

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Brie

2. Surname (Last Name)
Williams

3. Date
01-December-2014

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Cyrus Ahalt, MPP

5. Manuscript Title
The state of research funding from the National Institutes of Health for criminal justice health research

6. Manuscript Identifying Number (if you know it)

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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?	Personal Fees?	Non-Financial Support?	Other?	Comments
National Institutes of Health	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Career Development Award - K23

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Expert Witness, Angola Prison, Squire Sanders LLP	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Expert witness in lawsuit related to prison conditions of confinement on older adults

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Expert Witness, The ACLU National Prison Project	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Expert witness in lawsuit about the effects of conditions of confinement on older adults in prison
The Institute of Medicine / National Academy of Sciences	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Paid travel to participate in Workshop on Health and Incarceration
The Jacob and Valeria Langeloth Foundation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grant to develop a multidisciplinary program to improve the care of older jail inmates
UCSF/NIH Claude D. Pepper Center (Pilot Grant)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
National Palliative Care Research Center	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grant to describe the epidemiology of pain in older adults
Research Supplements for Aging Research on Health Disparities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grant to evaluate health disparities between jail and community-dwelling older adults
Robert Wood Johnson Foundation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grant to evaluate smoking cessation in older inmates

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Emily	2. Surname (Last Name) Wang	3. Date 06-January-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Cyrus Ahalt
5. Manuscript Title The state of research funding from the National Institutes of Health for criminal justice health research		
6. Manuscript Identifying Number (if you know it) M14-2161		

Section 2. The Work Under Consideration for Publication

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Dr. Wang has nothing to disclose.

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1. Given Name (First Name) Marielle	2. Surname (Last Name) Bolano	3. Date 06-January-2014
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Cyrus Ahalt
5. Manuscript Title The state of research funding from the National Institutes of Health for criminal justice research		
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Section 1. Identifying Information

1. Given Name (First Name)
Cyrus

2. Surname (Last Name)
Ahalt

3. Date
30-December-2014

4. Are you the corresponding author? Yes No

5. Manuscript Title
The state of research funding from the National Institutes of Health for criminal justice health research

6. Manuscript Identifying Number (if you know it)
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