

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.

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2. The work under consideration for publication.

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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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Entity: government agency, foundation, commercial sponsor, academic institution, etc.

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Pending: The patent has been filed but not issued

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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

Corley 1



Section 1.	Identifying Inform	ation				
1. Given Name (Fi Douglas	rst Name)	2. Surname (Last Nam Corley	e)		3. Date 21-Decemb	per-2015
4. Are you the cor	4. Are you the corresponding author?					
5. Manuscript Title Fecal Immunoch	e emical Test Program Pe	erformance Over Four	Rounds of Annu	ual Screening	A Retrospectiv	ve Cohort Study
6. Manuscript Ider M150983	ntifying Number (if you kno	ow it)				
Section 2.						
Section 2.	The Work Under Co	nsideration for Pu	blication			
any aspect of the s statistical analysis, Are there any rel- If yes, please fill c	stitution at any time receive ubmitted work (including etc.)? evant conflicts of intere out the appropriate info be removed by pressing	but not limited to grant st? Yes Normation below. If you	s, data monitoring	g board, study o	design, manusci	ript preparation,
Name of Institut	ion/Company	Grant? Personal Fees?	Non-Financial Support?	Other? Co	omments	
National Cancer Instit	tute	√				
Section 3.						
Section 3.	Relevant financial a	ctivities outside t	he submitted	work.		
of compensation clicking the "Add Are there any rel	the appropriate boxes in with entities as descril +" box. You should repevant conflicts of intere	bed in the instruction port relationships that	s. Use one line fo were present d	or each entity;	; add as many	lines as you need by
Section 4.	Intellectual Proper	ty Patents & Cop	yrights			
Do you have any	patents, whether planr	ned, pending or issued	d, broadly releva	ant to the worl	k? Yes	✓ No

Corley 2



Section 5. Polationships not severed above
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Dr. Corley reports grants from National Cancer Institute, during the conduct of the study; .

Evaluation and Feedback

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Corley 3



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Schottinger 1



Section 1.	Identifying Inform	ation					
1. Given Name (Firs Joanne	e (First Name) 2. Surname (Last Name) Schottinger		e) 3. Date 18-December-2015				
4. Are you the corre	esponding author?	☐ Yes ✓ No	Corresponding Author's Name				
5. Manuscript Title REF: "Fecal Immunochemical Test Program Performance Over Four Rounds of Annual Screening A Retrospective Cohort Study" 6. Manuscript Identifying Number (if you know it) M15-0983							
Section 2.	Section 2. The Work Under Consideration for Publication						
any aspect of the su statistical analysis, e	bmitted work (including	but not limited to grant	rom a third party (government, commercial, private foundation, etc.) for s, data monitoring board, study design, manuscript preparation, lo				
Section 3.	Relevant financial	activities outside tl	he submitted work.				
of compensation) clicking the "Add	with entities as descri	bed in the instructions port relationships that	whether you have financial relationships (regardless of amount s. Use one line for each entity; add as many lines as you need by were present during the 36 months prior to publication .				
Section 4.	Intellectual Proper	ty Patents & Cop	yrights				
Do you have any բ	oatents, whether plani	ned, pending or issued	d, broadly relevant to the work? Yes V No				

Schottinger 2



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Dr. Schottinger has nothing to disclose.

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

Zhao 1



Section 1. Iden	tifying Information						
1. Given Name (First Nam Wei	e) 2. Surnan Zhao	ne (Last Name)		3. Date 13-December-2015			
4. Are you the correspond	ou the corresponding author? Yes V		Corresponding Author's Name Christopher Jensen				
5. Manuscript Title Fecal Immunochemical Test Program Performance Over Four Rounds of Annual Screening A Retrospective Cohort Study							
6. Manuscript Identifying M15-0983	Number (if you know it)						
Section 2. The Work Under Consideration for Publication							
	ed work (including but not lim		a third party (government, co ta monitoring board, study de	mmercial, private foundation, etc.) for esign, manuscript preparation,			
Section 3. Relev	vant financial activities	outside the s	submitted work.				
of compensation) with	entities as described in the c. You should report relatio	instructions. Us	se one line for each entity; a	ationships (regardless of amount add as many lines as you need by nonths prior to publication.			
Section 4. Intell							
Intel	ectual Property Pate	nts & Copyri	ghts				
Do you have any patent	s, whether planned, pendi	ng or issued, br	oadly relevant to the work?	? ☐ Yes ✓ No			

Zhao 2



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

Levin 1



Section 1.	ldentifying Inform	nation			
1. Given Name (Fi Theodore	ne (First Name) 2. Surname (La: Levin		me) 3. Date 27-September-2015		
4. Are you the cor	orresponding author? Yes V No		Corresponding Author's Name Jensen		
5. Manuscript Title Fecal Immunochemical Test Program Performance Over Four Rounds of Annual Screening – A Retrospective Cohort Stu					
6. Manuscript Ide M15-0983	ntifying Number (if you kr	now it)			
Section 2.					
Section 2.	The Work Under C	onsideration for P	ublication		
any aspect of the s statistical analysis, Are there any rel If yes, please fill o	ubmitted work (including etc.)? evant conflicts of intere	y but not limited to gradest? ✓ Yes pormation below. If yo	s from a third party (government, commercial, private foundation, etc.) for ints, data monitoring board, study design, manuscript preparation, No bu have more than one entity press the "ADD" button to add a row.		
Name of Institut	ion/Company	Grant? Personal Fees?	Non-Financial Other? Comments		
NCI		✓			
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Section 3. Relevant financial activities outside the submitted work.					
of compensatior clicking the "Adc Are there any rel	n) with entities as descri I +" box. You should re evant conflicts of intere	ibed in the instructio port relationships tha est? Yes 🗸	te whether you have financial relationships (regardless of amount ins. Use one line for each entity; add as many lines as you need by at were present during the 36 months prior to publication . No		
Section 4.	Intellectual Prope	rty Patents & Co	pyrights		
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					

Levin 2



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Section 6. Disclosure Statement
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Dr. Levin reports grants from NCI, during the conduct of the study; .

Evaluation and Feedback

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Levin 3



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Quesenberry 1



Section 1. Identifying Inform			
Identifying Inform	nation		
Given Name (First Name) Charles	2. Surname (Last Name) Quesenberry		3. Date 29-September-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author Douglas A. Corley	or's Name
5. Manuscript Title Fecal Immunochemical Test Program F	Performance Over Four Rou	unds of Annual Screer	ning A Retrospective Cohort Study
6. Manuscript Identifying Number (if you k M15-0983	now it)	_	
Section 2. The Week Under C	onsideration for Publi		
Did you or your institution at any time rece any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inter	eive payment or services from g but not limited to grants, datest? Yes Notomation below. If you have	a third party (governmental at a monitoring board, st	ent, commercial, private foundation, etc.) for udy design, manuscript preparation, ity press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial Other?	Comments
National Cancer Institute	V		The study was conducted through the National Cancer Institute-funded Population-based Research Optimizing Screening through Personalized Regimens (PROSPR) consortium (U54 CA163262).
Section 3. Relevant financial	activities outside the	submitted work.	
Place a check in the appropriate boxes of compensation) with entities as describing the "Add +" box. You should re Are there any relevant conflicts of inter-	ribed in the instructions. Us port relationships that we	se one line for each ei	ntity; add as many lines as you need by

Quesenberry 2



Section 4					
Section 4. Intellectual Property Patents & Copyrights					
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					
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Royalties: Funds are coming in to you or your institution due to your patent

Quinn 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fii Virginia	rst Name)	2. Surname (Last Name Quinn)	3. Date 22-Septe	ember-2015
4. Are you the cor	4. Are you the corresponding author?			Corresponding Author's Name Christopher Jensen	
5. Manuscript Title Fecal Immunochemical Test Program Performance Over Four Rounds of Annual Screening Retrospective Cohort Study					
6. Manuscript Ider M15-0983	ntifying Number (if you kn	now it)			
Section 2.	The Work Under Co	onsideration for Pul	olication		
any aspect of the s statistical analysis, Are there any rela If yes, please fill of Excess rows can	ubmitted work (including etc.)? evant conflicts of intere out the appropriate info be removed by pressing	est? Yes No prmation below. If you g the "X" button.	, data monitoring	board, study design, manuone entity press the "AL	private foundation, etc.) for uscript preparation, DD" button to add a row.
Name of Institut	ion/Company	Fees?	Support?	Other Comments	
National Institutes of	Health	/			
	l				
Section 3.	Relevant financial	activities outside th	e submitted v	work.	
of compensation clicking the "Add Are there any rel) with entities as descri +" box. You should rep evant conflicts of intere	bed in the instructions port relationships that v est? Yes V	. Use one line fo were present du o		os (regardless of amount any lines as you need by rior to publication.
Section 4.	Intellectual Proper	ty Patents & Copy	rights		
Do you have any	patents, whether plans	ned, pending or issued	, broadly relevar	nt to the work? Yes	√ No

Quinn 2



Section 5. Relationships not severed 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. has nothing to disclose.

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Jensen 1



Cartinus				
Section 1. Identifying Information				
Given Name (First Name) Christopher	2. Surname (Last Name) Jensen		3. Date 22-September-2015	
4. Are you the corresponding author?	Yes ✓ No	Corresponding Autho	or's Name	
5. Manuscript Title Fecal Immunochemical Test Program Pe	erformance Over Four Rou	nds of Annual Screer	ning - A Retrospective Cohort Study	
6. Manuscript Identifying Number (if you kn M15-0983	ow it)	_		
Section 2. The Work Under Co	onsideration for Public	ation		
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, daest? Yes No ormation below. If you hav	ta monitoring board, st	ent, commercial, private foundation, etc.) for udy design, manuscript preparation, ity press the "ADD" button to add a row.	
Name of Institution/Company	Grant	n-Financial Other?	Comments	
NIH			As indicated, the primary funding source was the Population-based Research Optimizing Screening through Personalized Regimens (PROSPR) consortium, but the funding source had no role in the conception, design, analysis, or conduct of the study	
Section 3. Relevant financial	activities outside the s	ubmitted work.		
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of interes	bed in the instructions. Us port relationships that wer	e one line for each er	ntity; add as many lines as you need by	

Jensen 2



Soutien A				
Section 4. Intellectual Property Patents & Copyrights				
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				
Section 5. 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				
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Section 6. Disclosure Statement				
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Dr. Jensen reports grants from NIH, during the conduct of the study; .				

Evaluation and Feedback

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



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Jeffrey	2. Surname (Last Name) Lee	3. Date 21-September-2015	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Douglas Corley MD, PhD	
5. Manuscript Title Fecal Immunochemical Test Program F	Perforamnce over Four Rou	ands of Annual Screening: A Retrospective Cohort Study	
6. Manuscript Identifying Number (if you k M15-0983	now it)		
Section 2. The Work Under C	Consideration 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			
Section 3. Relevant financial	activities outside the s	submitted work.	
of compensation) with entities as desc	ribed in the instructions. Use port relationships that we	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 plan	nned, pending or issued, br	roadly relevant to the work? Yes V No	



Section 5.					
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Section 6.					
Section 6.	Disclosure Statement				
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Dr. Lee has noth	ing to disclose.				

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Section 1. Identifying Inform	ation		
1. Given Name (First Name) Alexander	2. Surname (Last Name) Lee	3. Date 28-October-2015	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Christopher Jensen	
5. Manuscript Title Fecal Immunochemical Test Program Pe	erformance Over Four Rou	unds of Annual Screening A Retrospective Cohort Study	
6. Manuscript Identifying Number (if you kn M15-0983	ow it)		
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Continue			
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Do you have any patents, whether plant	ned, pending or issued, br	roadly relevant to the work? Yes V No	



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Contreras 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fi Richard	ame (First Name) 2. Surname (Last Name) Contreras		3. Date 22-September-2015		
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name		
5. Manuscript Title Fecal Immunoch		erformance Over Four Ro	unds of Annual Screening A Retrospective Cohort Study		
6. Manuscript Ide M15-0983	ntifying Number (if you kr	now it)			
	ı				
Section 2.	Section 2. The Work Under Consideration for Publication				
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Section 3. Relevant financial activities outside the submitted work.					
of compensatior clicking the "Adc Are there any rel	the appropriate boxes a) with entities as descr	in the table to indicate while to indicate while in the instructions. Uport relationships that we	nether you have financial relationships (regardless of amount Use one line for each entity; add as many lines as you need by ere present during the 36 months prior to publication .		
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Do you have any	Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Contreras 2



Section 5. Polationships not sovered above
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Ghai 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fii Nirupa	rst Name)	2. Surname (Last Name) Ghai	3. Date 22-Sept	tember-2015
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Douglas A. Corley	
5. Manuscript Title Fecal Immunoch		erformance Over Four Rou	nds of Annual Screening A Retrospe	ective Cohort Study
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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	s 🗸 No

Ghai 2



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Ghai 3



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

Doubeni 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Chyke	rst Name)	2. Surname (Last Name) Doubeni		3. Date 22-September-2015
4. Are you the cor	responding author? Yes Von Corresponding Author's Name Christopher Jensen		Name	
5. Manuscript Title Fecal Immunoch		erformance Over Four Ro	ounds of Annual Screening	: A Retrospective Cohort Study
6. Manuscript Ider M15-0983	ntifying Number (if you kr	now it)		
Section 2.	The Work Under C	onsideration for Pub	lication	
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.	
of compensation clicking the "Add Are there any rele) with entities as descr	ibed in the instructions. port relationships that west? Yes No	Use one line for each entity	relationships (regardless of amount y; add as many lines as you need by 5 months prior to publication.
Name of Entity		Grant? Personal N	on-Financial Support? Other?	omments
Exact Sciences			Cor	nsultant, one-time
Section 4.	Intellectual Proper	rty Patents & Copyı	ights	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Doubeni 2



Section 5. Relationships not severed 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?
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
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Doubeni reports other from Exact Sciences, outside the submitted work; .

Evaluation and Feedback

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Doubeni 3



Instructions

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Identifying information.

Enter your full name. If you are NOT the corresponding author please check the box "no" and a space to enter the name of manuscript number and enter it. the corresponding author in the space that appears. Provide the requested manuscript information. Double-check the

The work under consideration for publication.

with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes". Then complete the appropriate supported by funds from the same institution that pays your salary and that institution did not receive third-party funds boxes to indicate the type of support and whether the payment went to you, or to your institution, or both. resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking is that of the work itself, from the initial conception and planning to the present. The requested information is about This section asks for information about the work that you have submitted for publication. The time frame for this reporting "No" means that you did the work without receiving any financial support from any third party — that is, the work was

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only list the pharmaceutical company. sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that

Other relationships.

appearance of potentially influencing, what you wrote in the submitted work. Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the



Section 1.	Identifying Information	mation	
1. Given Name (First Name)	st Name)	2. Surname (Last Name)	3. Effective Date (07-August-2008)
4. Are you the corresponding author?	esponding author?	☐ Yes X No	•
5. Manuscript Title Com subject to the first of the firs	5. Manuscript Title Com or bisket 1 - chjur tek Li 6. Manuscript Identifying Number (if you know it) M12 - 2996	Le expectency: a	recommend to the option

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.

or Publ	ication				9
No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
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7. Other	Туре No	The Work Under Consideration for Publication
	Money Money to Paid Your to You Institution	cation
	o Name of Entity n*	
	Comments**	
ADD X ADD		

Section 3. Relevant financial activities outside the submitted work.

clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission. of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount

"Add" button to add a row. Excess rows can be removed by clicking the "X" button. Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the

7. Payment for manuscript preparation	Payment for lectures including service on speakers bureaus	5. Grants/grants pending	4. Expert testimony	3. Employment	2. Consultancy	1. Board membership	Type of Relationship (in alphabetical order)	Relevant financial activities outside the submitted work
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							Money to Your Institution*	ted work
							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.



Relevant financial activities outside the submitted work	side the	e submitt	ed work		27	
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
8. Patents (planned, pending or						ADD
issued)	囚					ADD X
9. Royalties	图					×
10. Payment for development of educational presentations	\square					×
11. Stock/stock options	区					× ADD
 Travel/accommodations/ meeting expenses unrelated to activities listed** 	区					× ADD
13. Other (err on the side of full disclosure)	M					ADD ×
						ADD

Section 4. Other relationships

potentially influencing, what you wrote in the submitted work? Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of

 $\overline{\hspace{0.1in}}$ No other relationships/conditions/circumstances that present a potential conflict of interest

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

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

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

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

Zauber 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Ann	2. Surname (Last Name) Zauber		3. Date 24-September-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Nam Douglas Corley	e
5. Manuscript Title Fecal Immunochemical Test Program P	erformance Over Four Rou	ınds of Annual Screening ? A	Retrospective Cohort Study
6. Manuscript Identifying Number (if you kr M15-0983	now it)		
Section 2. The Work Under Co	onsideration for Public	cation	
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	g but not limited to grants, da		
Section 3. Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of interes	ibed in the instructions. Us port relationships that wer	se one line for each entity; ad	ld as many lines as you need by
Section 4. Intellectual Proper	rty Patents & Copyric	ghts	
Do you have any patents, whether plan			Yes ✓ No

Zauber 2



Section 5. Relationships not severed above
Relationships not covered above
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Zauber 3



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Marks 1



Section 1. Identifying Info	rmation	
Given Name (First Name) Amy	2. Surname (Last Name) Marks	3. Date 08-October-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Douglas A. Corley
5. Manuscript Title Fecal Immunochemical Test Progran	n Performance Over Four Rou	unds of Annual Screening A Retrospective Cohort Study
6. Manuscript Identifying Number (if you M15-0983	ı know it)	
Section 2. The Work Under	Consideration for Public	cation
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Do you have any patents, whether p	anned, pending or issued, br	roadly relevant to the work? Yes V No

Marks 2



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Marks 3



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earning royalties or not **Royalties:** Funds are coming in to you or your institution due to your

patent

Mysliwiec 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Pauline	2. Surname (Last Name) Mysliwiec	3. Date 01-October-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Douglas Corley
5. Manuscript Title Fecal Immunochemical Test Program Po	erformance Over Four Rou	nds of Annual Screening A Retrospective Cohort Study"
6. Manuscript Identifying Number (if you kr M15-0983	now it)	-
Section 2. The Work Under Co	onsideration for Public	ation
	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	ubmitted work.
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Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Mysliwiec 2



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