

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.

2. The work under consideration for publication.

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3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

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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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Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued **Issued:** The patent has been issued by the agency

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

Towner 1



Section 1. Identifying	I. (
Identifying	Information	
Given Name (First Name) William	2. Surname (Last Name) Towner	3. Date 03-August-2015
4. Are you the corresponding author	or? Yes 🗸 No	Corresponding Author's Name Stephen Pianko MD, PhD
5. Manuscript Title Sofosbuvir-velpatasvir combina infection: a randomized trial	tion therapy for treatment-experi	rienced patients with genotype 1 and 3 hepatitis C virus
6. Manuscript Identifying Number M15-1014	(if you know it)	
Section 2. The Work U	nder Consideration for Public	ication
		n a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Are there any relevant conflicts		
If yes, please fill out the appropr Excess rows can be removed by	•	ve more than one entity press the "ADD" button to add a row.
Name of Institution/Company	Grant	On-Financial Other? Comments
Gilead	✓	Paid to institution
Section 3. Relevant fin		
Relevant fin	ancial activities outside the s	submitted work.
of compensation) with entities a	as described in the instructions. Us ould report relationships that wer of interest? Yes No	nether you have financial relationships (regardless of amount lse one line for each entity; add as many lines as you need by ere present during the 36 months prior to publication.
Name of Entity	Grant	On-Financial Other? Comments
BMS	✓	Paid to institution
/iiV	✓	Paid to institution
Merck	✓	Paid to institution

Towner 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 V
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
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. Towner reports grants from Gilead, during the conduct of the study; grants from BMS, grants from ViiV, grants from Merck, outside the submitted work; .

Evaluation and Feedback

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

Towner 3



Instructions

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

Brainard 1



Section 1.	Identifying Inform	nation							
1. Given Name (Fi Diana	rst Name)	2. Surname (Last Name) Brainard		3. Date 19-August-2015					
4. Are you the corresponding author? Yes No									
5. Manuscript Title Sofosbuvir-velpatasvir combination therapy for treatment-experienced patients with genotype 1 and 3 hepatitis C virus infection: a randomized trial									
6. Manuscript Ider M15-1014	ntifying Number (if you kr	now it)							
Section 2.									
Section 2.	The Work Under C	onsideration for Publication	ation						
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, dat		t, commercial, private foundation, etc.) for y design, manuscript preparation,					
Section 3.	Relevant financial	activities outside the su	ıbmitted work.						
of compensation clicking the "Add Are there any rel) with entities as descr	ibed in the instructions. Use port relationships that were est?	one line for each entit	I relationships (regardless of amount ty; add as many lines as you need by 6 months prior to publication.					
Name of Entity		Grant	Financial Other?	Comments					
Gilead Sciences, Inc.			☐ ✓ En	mployee of Gilead Sciences, Inc.					
Section 4.	Intellectual Prope	rty Patents & Copyrig	hts						
Do you have any	patents, whether plan	ned, pending or issued, bro	adly relevant to the wo	ork? ☐ Yes ✓ No					

Brainard 2



Section 5. Polationships not sovered 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. Brainard reports other from Gilead Sciences, Inc., outside the submitted work; .

Evaluation and Feedback

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

Brainard 3



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patent

Rabinovitz 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Mordechai	rst Name)	2. Surname (Last Name) Rabinovitz		Date August-2015
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Stephen Pianko	
5. Manuscript Title Sofosbuvir-velpa infection: a rand	atasvir combination the	erapy for treatment-experi	enced patients with genotype 1	and 3 hepatitis C virus
6. Manuscript Ide	ntifying Number (if you kr	now it)		
			-	
Section 2.	The Work Under C	onsideration for Public	ation	
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, comme ta monitoring board, study design,	
Section 3.	Relevant financial	activities outside the s	ubmitted work.	
of compensation clicking the "Add	n) with entities as descri	ibed in the instructions. Us port relationships that wer	ether you have financial relatior e one line for each entity; add a e present during the 36 mont	as many lines as you need by
Section 4.	Intellectual Proper	rty Patents & Copyrig	ıhts	
Do you have any			oadly relevant to the work?	Yes ✓ No

Rabinovitz 2



Section 5. Relationships not severed above
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Dr. Rabinovitz has nothing to disclose.

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Rabinovitz 3



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Dore 1



Costion 1				
Section 1. Identifying I	nformation			
Given Name (First Name) Gregory	2. Surname (Last Name) Dore		3. Date 03-August-2015	
4. Are you the corresponding autho	or? Yes 🗸 No	Corresponding Autho	or's Name	
5. Manuscript Title Sofosbuvir-velpatasvir combinat infection: a randomized trial	ion therapy for treatment-expe	rienced patients with g	enotype 1 and 3 hepatitis C virus	
6. Manuscript Identifying Number (i M15-1014	f you know it)			
Section 2. The Work Un	der Consideration for Publ	ication		
any aspect of the submitted work (in statistical analysis, etc.)? Are there any relevant conflicts of	ncluding but not limited to grants, do of interest? Yes No ate information below. If you ha	data monitoring board, stu	ent, commercial, private foundation, etc.) foudy design, manuscript preparation, ty press the "ADD" button to add a row	
Name of Institution/Company	Grant? Personal No	on-Financial Other?	Comments	
Gilead	V		Clinical research grant to St Vincent's Hospital, Sydney	_
Section 3. Relevant fina	ancial activities outside the	submitted work.		
of compensation) with entities as	s described in the instructions. U	Jse one line for each en	ial relationships (regardless of amount atity; add as many lines as you need by a 36 months prior to publication .	
Are there any relevant conflicts of lf yes, please fill out the appropri				
	Grant? Personal No	on-Financial 7		
Name of Entity	Grant'	Support? Other	Comments	
Gilead	✓			_
Abbvie	✓			
Merck	✓			

Dore 2



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments			
Bristol-Myers Squibb	✓							
Janssen	✓							
Roche	\checkmark							
Gilead		✓			Advisory Board honoraria, Speakers bureau, consulting			
Abbvie		✓			Advisory Board honoraria			
Merck		✓			Advisory Board honoraria, Speakers bureau, consulting			
Bristol-Myers Squibb		✓			Advisory Board honoraria			
Janssen		✓			Advisory Board honoraria, Speakers bureau, consulting			
Roche		✓			Advisory Board honoraria, Speakers bureau			
GlaxoSmithKline		✓			Advisory Board honoraria			
Gilead			✓		Travel support			
Abbvie			✓		Travel support			
Merck			✓		Travel support			
Bristol-Myers Squibb			✓		Travel support			
Roche			√		Travel support			
Section 4. Intellectual Property Patents & Copyrights Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No								
Section 5. Relationships not c	overed	above						
Are there other relationships or activities potentially influencing, what you wrote i				nfluence	d, or that give the appearance of			
Yes, the following relationships/conditions/cir								
At the time of manuscript acceptance, jo	urnals wi	ll ask autho	ors to confirm and	l, if neces	sary, update their disclosure statements.			

Dore 3

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. Dore reports grants from Abbvie, grants from Merck, grants from Bristol-Myers Squibb, grants from Janssen, grants from Roche, personal fees from Gilead, personal fees from Abbvie, personal fees from Merck, personal fees from Bristol-Myers Squibb, personal fees from Janssen, personal fees from Roche, personal fees from GlaxoSmithKline, non-financial support from Gilead, non-financial support from Abbvie, non-financial support from Merck, non-financial support from Bristol-Myers Squibb, non-financial support from Roche, outside the submitted work;

Evaluation and Feedback

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Dore 4



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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 the corresponding author in the space that appears. Provide the requested manuscript information. Double-check the manuscript number and enter it.

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4. Other relationships.

Use this section to report 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.



Section 1.	Identifying Inform	mation		
1. Given Name (Fi K. Rajender	rst Name)	2. Surname (Last Name) Reddy	3. Effective Date (07-August-2008 31-July-2015)
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Name Stephen Pianko	
5. Manuscript Title Sofosbuvir-velpa infection: a rand	atasvir combination th	erapy for treatment-exper	ienced patients with genotype 1 and 3 hepatitis C virus	
6. Manuscript Ide Not known	ntifying 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 f	for Publ	lication				
Туре	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant			✓	Gilead		×
						ADD
2. Consulting fee or honorarium	✓					×
						ADD
Support for travel to meetings for the study or other purposes		✓		Gilead	Attend Investigators meeting	×
						ADD
 Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like 	✓					×
						ADD
Payment for writing or reviewing the manuscript	✓					×
						ADD
Provision of writing assistance, medicines, equipment, or administrative support	√					×



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

Section 3.

Relevant financial activities outside the submitted work.

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

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

Relevant financial activities 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		✓		Abbvie		×	
2. Consultancy		✓		Merck		×	
2. Consultancy		✓		Janssen		×	
2. Consultancy		√		Gilead		×	
2. Consultancy		√		BMS		×	
						ADD	
3. Employment	\checkmark					×	
						ADD	
4. Expert testimony	\checkmark					×	
						ADD	
5. Grants/grants pending			\checkmark	Abbvie		×	

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

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



Relevant financial activities out	side the	submit	ted work			
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
5. Grants/grants pending			✓	Merck		×
5. Grants/grants pending			✓	Janssen		×
5. Grants/grants pending			✓	Abbvie		×
5. Grants/grants pending			\checkmark	BMS		×
						ADD
Payment for lectures including service on speakers bureaus	✓					×
						ADD
Payment for manuscript preparation	√					×
						ADE
8. Patents (planned, pending or issued)	✓					×
						ADE
9. Royalties		✓		Uptodate		×
						ADI
10. Payment for development of educational presentations		✓		ViralEd		×
						ADE
11. Stock/stock options	✓					×
42 T 1/ 1 1 / 1						ADE
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	✓					×
						ADE
13. Other (err on the side of full disclosure)	✓					×
						ADD

^{*} 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.



Section 4.	Other relationships
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals may ask authors to disclose further information about reported relationships.
	Hide All Table Rows Checked 'No'

Evaluation and Feedback

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Instructions

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

McHutchison 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fii John	rst Name)	2. Surname (Last Nam McHutchison	ne)	3. Da 05-A	nte ugust-2015
4. Are you the cor	responding author?	Yes ✓ No	Correspond	ding Author's Name	
infection: a rando 6. Manuscript Ider	ntasvir combination the		perienced patie	nts with genotype 1 a	and 3 hepatitis C virus
M15-1014					
Section 2.	The Work Under Co	onsideration for D	.blication		
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 grandest? Yes 10 Pormation below. If you	ts, data monitoring	g board, study design, n	cial, private foundation, etc.) for nanuscript preparation, "ADD" button to add a row.
Name of Institut			Non-Financial Support?	Other? Commen	ts
Gilead Sciences				Employmen	t and stock
Section 3.	Relevant financial	activities outside t	he submitted	work.	
of compensation clicking the "Add Are there any rel) with entities as descri	ibed in the instruction port relationships that	s. Use one line for were present d	or each entity; add as	ships (regardless of amount many lines as you need by s prior to publication .
Section 4.	Intellectual Proper	ty Patents & Cop	yrights		
Do you have any	patents, whether plan	ned, pending or issue	d, broadly releva	ant to the work?	Yes ✓ No

McHutchison 2



Section 5. Polationships 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. McHutchison reports other from Gilead Sciences, during the conduct of the study;.

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McHutchison 3



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

McNally 1



Section 1.	entifying Inform	ation			
1. Given Name (First Na John	, ,	Surname (Last Nam McNally	ne)	3. Date 15-Sep	tember-2015
4. Are you the correspo	ending author?	Yes ✓ No	Correspond Stephen P	ding Author's Name ianko	
5. Manuscript Title Sofosbuvir-velpatasvi infection: a randomiz		rapy for treatment-ex	perienced patier	nts with genotype 1 and	d 3 hepatitis C virus
6. Manuscript Identifyir M15-1014	ng Number (if you kn	ow it)			
Section 2. The	e Work Under Co	onsideration for Pu	ıblication		
any aspect of the submi statistical analysis, etc.)? Are there any relevan	tted work (including	but not limited to grant		(government, commercial g board, study design, mai	, private foundation, etc.) for nuscript preparation,
Section 3. Rel	evant financial a	activities outside t	he submitted	work.	
of compensation) wit	h entities as descril ox. You should rep t conflicts of intere	bed in the instruction port relationships that est? Yes rmation below.	s. Use one line fo were present d No	or each entity; add as m uring the 36 months p	ps (regardless of amount any lines as you need by prior to publication .
Name of Entity		Grant? Personal Fees?	Non-Financial Support?	Other? Comments	
Gilead Sciences, Inc				I am a stock ho Gilead Science	lder and employee of
Section 4					
Section 4. Into	ellectual Proper	ty Patents & Cop	yrights		
Do you have any pate	ents, whether planr	ned, pending or issue	d, broadly releva	nt to the work?	s 📝 No

McNally 2



Section 5. Polationships not severed 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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John McNally is a employee and stockholder of Gilead Sciences

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

Flamm 1



Section 1.	Identifying Inform	ation					
1. Given Name (Fir Steven	st Name)	2. Surnar Flamm	ne (Last Nar	ne)		3. Date 04-August-2015	
4. Are you the corr	esponding author?	Yes	✓ No	Correspond Pianko	ding Autho	or's Name	
5. Manuscript Title Sofosbuvir-velpa infection: a rando	tasvir combination the	rapy for tr	eatment-e	xperienced patie	nts with g	genotype 1 and 3 hepatitis C virus	
6. Manuscript Iden M15-1014	tifying Number (if you kno	ow it)					
Section 2.	The Work Under Co	ncidora	tion for P	ublication			
any aspect of the su statistical analysis,	ubmitted work (including	but not lim		ts, data monitoring		ent, commercial, private foundation, e udy design, manuscript preparation,	tc.) for
Section 3.	Relevant financial a	activities	outside	the submitted	work.		
of compensation clicking the "Add Are there any rele) with entities as descril	oed in the ort relation st?	instruction Inships tha	ns. Use one line fo	or each er	cial relationships (regardless of am ntity; add as many lines as you nee e 36 months prior to publication	d by
Name of Entity		Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
Gilead			✓			Consultant	
Gilead		✓				Clinical research	
BMS			✓			Consultant	
BMS		✓				Clinical research	
Abbvie			✓			Consultant	
Abbvie		✓				Clinical research	
Janssen			✓			Consultant	
Janssen		✓				Clinical research	

Flamm 2



Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other? Comment	:s
Merck			Consultant	
Section 4. Intellectual Bronout				
Intellectual Propert	y Patents & Cop	yrights		
Do you have any patents, whether plann	ed, pending or issue	d, broadly relevar	nt to the work?	∕es ✓ No
Section 5. Relationships not c	overed above			
Are there other relationships or activities potentially influencing, what you wrote i			nfluenced, or that giv	re the appearance of
Yes, the following relationships/cond	litions/circumstances	s are present (exp	lain below):	
✓ No other relationships/conditions/cir	cumstances that pre	sent a potential c	onflict of interest	
At the time of manuscript acceptance, jo On occasion, journals may ask authors to				
Section 6. Disclosure Stateme	nt			
Based on the above disclosures, this form below.		enerate a disclos	ure statement, which	will appear in the box
Dr. Flamm reports personal fees from Gil from Abbvie, grants from Abbvie, persor submitted work; .				• •

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Gane 1



Section 1. Identifying Inform	ation	
1. Given Name (First Name) Edward	2. Surname (Last Name) Gane	3. Date 01-August-2015
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Stephen Pianko
5. Manuscript Title Sofosbuvir-velpatasvir combination the infection: a randomized trial	rapy for treatment-experi	enced patients with genotype 1 and 3 hepatitis C virus
6. Manuscript Identifying Number (if you kn M15-1014	ow it)	
Section 2. The Work Under Co	onsideration for Public	cation
		a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,
Are there any relevant conflicts of intere	st? Yes ✓ No	
Section 3. Relevant financial a	activities outside the s	submitted work.
of compensation) with entities as descri clicking the "Add +" box. You should rep	bed 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.
Are there any relevant conflicts of intere		
If yes, please fill out the appropriate info	imation below.	
Name of Entity	Grant? Personal Fees? S	n-Financial other? Comments
Gilead Speakers Bureau		
Gilead Advisors' Meeting		
Section 4. Intellectual Proper	ty Patents & Copyrig	ghts
Do you have any patents, whether plann		

Gane 2



Section 5. Polationships not severed above
Relationships not covered above
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Dr. Gane reports personal fees from Gilead Speakers Bureau, personal fees from Gilead Advisors' Meeting, outside the submitted work; .

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Section 1. Identifying Inform	ation	
Given Name (First Name) Simone	2. Surname (Last Name) Strasser	3. Date 03-August-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Stephen Pianko
5. Manuscript Title Sofosbuvir-velpatasvir combination the infection: a randomized trial	rapy for treatment-exper	ienced patients with genotype 1 and 3 hepatitis C virus
6. Manuscript Identifying Number (if you kn M15-1014	ow it)	
Section 2. The Work Hardwood		
Did you or your institution at any time recei	but not limited to grants, d	n a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the	submitted work.
of compensation) with entities as descri clicking the "Add +" box. You should rep	bed in the instructions. U port 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.
Are there any relevant conflicts of intere If yes, please fill out the appropriate info		
Name of Entity	Grant	n-Financial Other? Comments
Gilead Sciences		Honoraria for Advisory Board, speaker fees
Section 4 Intellectual Proper	ty Patents & Copyri	ghts
Do you have any patents, whether plann	ned, pending or issued, b	roadly relevant to the work? Yes Vo



appearance of
disclosure statements
appear in the box

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4. Intellectual Property.

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Other: Anything not covered under the previous three boxes

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Issued: The patent has been issued by the agency

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

Mogalian 1



Section 1.	Identifying Inform	nation					
1. Given Name (First Name) Erik		2. Surname (Last Name) Mogalian		3. Date 20-August-2015			
4. Are you the cor	responding author?	☐ Yes ✓ No	-	Corresponding Author's Name Stephan Pianko			
Sofosbuvir-velpa	5. Manuscript Title Sofosbuvir-velpatasvir combination therapy for treatment-experienced patients with genotype 1 and 3 hepatitis C virus infection: a randomized trial						
6. Manuscript Identifying Number (if you know it) M15-1014							
	ı						
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 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 Non-Financial Support Comments							
Gilead Sciences, Inc.				✓ Employment			
Section 3.	Relevant financial	activities outside t	he 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							
Section 4.	Intellectual Proper	ty Patents & Cop	yrights				
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo							

Mogalian 2



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

Evaluation and Feedback

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

Mogalian 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.

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

Stedman 1



Costion 1			
Section 1. Identifying Inform	nation		
Given Name (First Name) Catherine	2. Surname (Last Name) Stedman		3. Date 21-August-2015
4. Are you the corresponding author?	Yes ✓ No	Corresponding Autho	or's Name
5. Manuscript Title Sofosbuvir-velpatasvir combination th infection: a randomized trial	erapy for treatment-experi	ienced patients with g	genotype 1 and 3 hepatitis C virus
6. Manuscript Identifying Number (if you k M15-1014	now it)	_	
Section 2. The Work Under C	Consideration for Publi	cation	
Did you or your institution at any time receany aspect of the submitted work (includin statistical analysis, etc.)?			ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
Are there any relevant conflicts of inter			
If yes, please fill out the appropriate inf Excess rows can be removed by pressir		ve more than one enti	ty press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial Other?	Comments
Gilead Sciences		✓	financial support to perform study
Section 3. Relevant financial	activities outside the	submitted work.	
Place a check in the appropriate boxes of compensation) with entities as desc clicking the "Add +" box. You should re	ribed in the instructions. U	se one line for each er	
Are there any relevant conflicts of inter			
If yes, please fill out the appropriate inf	ormation below.		
Name of Entity	Grant	n-Financial Other?	Comments
Gilead Sciences		✓	
Abbvie		✓	
MSD		✓	

Stedman 2



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
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. Stedman reports non-financial support from Gilead Sciences, during the conduct of the study; personal fees and non-financial support from Gilead Sciences, personal fees and non-financial support from MSD, outside the submitted work; .

Evaluation and Feedback

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

Stedman 3



Instructions

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

Pianko 1



1. Given Name (First Name) Stephen	2. Surnar Pianko	me (Last Nar	me)		3. Date 22-August-2015
4. Are you the corresponding author?	✓ Yes	No			
5. Manuscript Title Sofosbuvir-velpatasvir combination th Infection: a randomized trial	nerapy for tr	eatment ex	xperienced patier	nts with g	enotype 1 and 3 hepatitis C virus
6. Manuscript ldentifying Number (if you k M15-1014	know it)				
Section 2. The Work Under C	Considera	tion for P	ublication		
statistical analysis, etc.)? Are there any relevant conflicts of interiors, please fill out the appropriate in Excess rows can be removed by pressions.	formation b	Yes pelow. If yo	nts, data monitoring No u have more than Non-Financial		
Are there any relevant conflicts of inter f yes, please fill out the appropriate in	formation b	Yes pelow. If you	No u have more than	one enti	ty press the "ADD" button to add a Comments
Are there any relevant conflicts of interfying fyes, please fill out the appropriate in excess rows can be removed by pression and of institution/Company	formation b	Yes pelow. If you putton. Personal	No u have more than		
Are there any relevant conflicts of interfect of the fives, please fill out the appropriate in excess rows can be removed by pression ame of Institution/Company and Sciences	formation b	Yes Delow. If you putton. Personal Fees?	No u have more than	Other?	Comments Advisory Board and SPeaker Bureau,
are there any relevant conflicts of interfees, please fill out the appropriate in excess rows can be removed by pression ame of Institution/Company and Sciences	formation b	Yes Delow. If you putton. Personal Fees?	No u have more than	Other?	Comments Advisory Board and SPeaker Bureau, Clinical trial payments to institution.
Are there any relevant conflicts of interfects of interfects of interfects of the second interfe	formation b	Yes Delow. If you putton. Personal Fees?	No u have more than	Other?	Comments Advisory Board and SPeaker Bureau, Clinical trial payments to institution. Clinical Trial Payments to institution

Pianko 2



Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments
Gilead		✓	✓		No conflict has influenced the paper but Gilead is sponsor of this trial
Section 4. Intellectual Propert	y Pate	ents & Co _l	pyrights		
Do you have any patents, whether plann	ed, pendi	ing or issue	ed, broadly releva	nt to the	work? Yes No
Continue 5					
Section 5. Relationships not c	overed	above			
Are there other relationships or activities potentially influencing, what you wrote i				nfluence	d, or that give the appearance of
Yes, the following relationships/cond	litions/cir	cumstance	es are present (exp	olain belo	w):
✓ No other relationships/conditions/cir	cumstan	ces that pre	esent a potential	conflict o	finterest
At the time of manuscript acceptance, jo On occasion, journals may ask authors to					
Section 6. Disclosure Statemen					
Disclosure Stateme	nt				
Based on the above disclosures, this form below.	n will auto	omatically	generate a disclos	sure state	ment, which will appear in the box
Dr. Pianko reports personal fees and oth personal fees and other from Abbvie, otl support from Gilead, outside the submit	her from l	MSD, durir			•

Evaluation and Feedback

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Pianko 3



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Han 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi	rst Name)	2. Surname (Last Name) Han		3. Date 22-September-2015
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Nar	me
infection: a rand	ntasvir combination the		enced patients with genoty	pe 1 and 3 hepatitis C virus
M15-1014		•	-	
Section 2.	The Work Under Co	onsideration for Public	ation	
any aspect of the s statistical analysis,	stitution at any time recei ubmitted work (including	ive payment or services from but not limited to grants, da		mmercial, private foundation, etc.) for sign, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	ubmitted work.	
of compensation clicking the "Add) with entities as descri	bed in the instructions. Us port relationships that wer	e one line for each entity; a	ationships (regardless of amount dd as many lines as you need by nonths prior to publication.
Section 4.				
Section 4.	Intellectual Proper	ty Patents & Copyrig	hts	
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	☐ Yes ✓ No

Han 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. Han has nothing to disclose.

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Han 3



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

Roberts 1



Section 1.	Identifying Inform	ation					
1. Given Name (Fi	rst Name)	2. Surnan Roberts	ne (Last Nar	ne)		3. Date 19-August-2015	
4. Are you the cor	responding author?	Yes	✓ No	Correspond Dr Stephe	_	or's Name	
5. Manuscript Title Sofosbuvir-velpatasvir combination therapy for treatment-experienced patients with genotype 1 and 3 hepatitis C virus infection: a randomized trial							
6. Manuscript Ider M15-1014	ntifying Number (if you kn	ow it)					
Section 2.	The Work Under Co	nsiderat	tion for P	ublication			
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.							
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Name of Entity		Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
Gilead Sciences					√	Consultancy fee for Australian Advisory Board	
Bristol Myers Squibb					✓	Consultancy fee for Australian Advisory Board	
MSD					✓	Consultancy fee for Australian Advisory Board	
AbbVie					✓	Consultancy fee for Australian Advisory Board	

Roberts 2



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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Dr. Roberts reports other from Gilead Sciences, other from Bristol Myers Squibb, other from MSD, other from AbbVie, outside the submitted work; .

Evaluation and Feedback

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Roberts 3



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This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

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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.

Use this section to report 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.

Definitions.

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Issued: The patent has been issued by the agency

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

Doehle 1



Section 1. Identifying Inform	ation					
1. Given Name (First Name) Brian	2. Surname (Last Name) Doehle	3. Date 19-August-2015				
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Stephen Pianko				
5. Manuscript Title Sofosbuvir-velpatasvir combination therapy for treatment-experienced patients with genotype 1 and 3 hepatitis C virus infection: a randomized trial						
6. Manuscript Identifying Number (if you kn M15-1014	OW IL)	_				
Section 2. The Work Under Co	onsideration for Public	cation				
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da est? Yes No ormation below. If you hav	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation, we more than one entity press the "ADD" button to add a row.				
Name of Institution/Company	Grant? Personal Nor	n-Financial Other? Comments				
Gilead Sciences		Employee				
Section 3. Relevant financial a	activities outside the s	submitted work.				
of compensation) with entities as descri	bed 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	ty Patents & Copyric	ahts				
Do you have any patents, whether plann	, , , ,					

Doehle 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. Doehle reports personal fees from Gilead Sciences, during the conduct of the study; .

Evaluation and Feedback

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

Doehle 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.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds 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".

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

Kumar 1



Section 1. Identifyi	ng Information					
1. Given Name (First Name) Sonal	2. Surname (Last Name) Kumar	3. Date 22-September-2015				
4. Are you the corresponding a	uthor? Yes V No Correspo	onding Author's Name				
5. Manuscript Title Sofosbuvir-velpatasvir combination therapy for treatment-experienced patients with genotype 1 and 3 hepatitis C virus infection: a randomized trial						
6. Manuscript Identifying Numb M15-1014	per (if you know it)					
Section 2. The Work	Under Consideration for Publication					
	rk (including but not limited to grants, data monitor	ty (government, commercial, private foundation, etc.) for ing board, study design, manuscript preparation,				
Section 3. Relevant	financial activities outside the submitte	d work.				
of compensation) with entiti	es as described in the instructions. Use one line is should report relationships that were present cts of interest? Yes No	have financial relationships (regardless of amount e for each entity; add as many lines as you need by a during the 36 months prior to publication.				
Name of Entity	Grant? Personal Non-Financia Fees? Support?	Other? Comments				
Gilead Sciences						
Section 4. Intellectu	al Property Patents & Copyrights					
Do you have any patents, wh	ether planned, pending or issued, broadly rele	vant to the work? Yes V No				

Kumar 2



Section 5. Polationships 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):
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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
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Kumar reports personal fees from Gilead Sciences, outside the submitted work; .

Evaluation and Feedback

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

Kumar 3



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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



Section 1.	Identifying Information									
1. Given Name (Fi Mitchell	2. Surnam Shiffman	ne (Last Nam	e)	3. Date 22-September-2015						
4. Are you the corresponding author?		Yes ✓ No		Correspon Pianko	Corresponding Author's Name Pianko					
5. Manuscript Title Sofosbuvir-velpatasvir combination therapy for treatment-experienced patients with genotype 1 and 3 hepatitis C virus infection: a randomized trial										
6. Manuscript Identifying Number (if you know it)										
	ı									
Section 2.	The Work Under C	onsiderat	ion for Pu	ıblication						
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?										
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 Institut				Non-Financial Support?	Other?	Comments				
Gilaed		√								
Section 3.	Relevant financial	activities	outside t	he 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? Ves No										
If yes, please fill out the appropriate information below.										
Name of Entity		Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments				
Abbvie		✓	√			Speaker and Advisor				
BMS		✓	✓			Speaker and Advisor				
Boehringer-Ingelheim		✓	✓			Advisor				



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments			
Conatus	✓							
Galectin	✓							
Gilead	✓	✓			Speaker and Avisor			
Intercept	✓							
Janssen		✓			Advisor			
Lumena	✓							
Merck	✓	✓			Advisor			
Section 5. Relationships no	ot 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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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.								
Dr. Shiffman reports grants from Gila personal fees from BMS, grants and p grants and personal fees from Gileac personal fees from Merck, outside th	personal fees I, grants from	from Boeh Intercept,	ringer-Ingelheim	, grants f				



Evaluation and Feedback

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