

#### **Instructions**

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# Identifying information.

# 2. The work under consideration for publication.

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# Relationships not covered above.

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Section 1.								
Section 1.	Identifying Inform	ation						
1. Given Name (Fir Massimo	rst Name)	2. Surname (Last Name)  Colombo  3. Date 23-September-2016						
4. Are you the cor	responding author?	<b>√</b> Yes	0					
5. Manuscript Title Treatment with Ledipasvir-Sofosbuvir for 12 or 24 weeks in Kidney Transplant Recipients with Chronic Genotype 1 or 4 HCV Infection: A Randomized Trial								
6. Manuscript Identifying Number (if you know it)								
Section 2.	The Work Under Co	onsideration fo	r Publication					
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to		-	. commercial, private foundation, on design, manuscript preparation,	etc.) for		
Section 3.	Relevant financial	activities outsi	de the submitted	work.				
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Name of Entity		Grant? Perso	Non-Financial Support	Other?	Comments			
Легск								
Roche								
Bayer								
BMS								
Gilead Sciences								
/ertex								
anssen								
Abbvie								



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments		
Sanofi		✓					
Intercept		$\checkmark$					
Section 4. Intellectual Property							
Intellectual Propert	y Pate	ents & Co	pyrights				
Do you have any patents, whether plann	ed, pend	ing or issue	ed, broadly releva	nt to the v	work? Yes 🗸 No		
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Yes, the following relationships/cond	Yes, the following relationships/conditions/circumstances are present (explain below):						
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At the time of manuscript acceptance, jo On occasion, journals may ask authors to						nents.	
Section 6. Disclosure Stateme	nt						
Based on the above disclosures, this form below.	n will aut	omatically	generate a disclos	sure state	ment, which will appear in the box	(	
Dr. Colombo reports personal fees from personal fees from Gilead Sciences, pers personal fees from Sanofi, personal fees	onal fees	from Verte	ex, personal fees fi	rom Janss		ИS,	



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Aghemo 1



Section 1. Identifying Info	mation		
Given Name (First Name) Alessio	2. Surname (Last Aghemo	Name)	3. Date 22-September-2016
4. Are you the corresponding author?	Yes ✓ N	o Correspondin Massimo Col	ng Author's Name Iombo
5. Manuscript Title Treatment with Ledipasvir-Sofosbuvi Infection: A Randomized Trial 6. Manuscript Identifying Number (if you		in Kidney Transplant Re	ecipients with Chronic Genotype 1 or 4 H
Section 2. The Work Under	Consideration fo	r Publication	
Section 3.		<b>√</b> No	
Relevant financia	al activities outsi	de the submitted wo	ork.
of compensation) with entities as des	cribed in the instruc	tions. Use one line for e	e financial relationships (regardless of am each entity; add as many lines as you nee ring the 36 months prior to publication
Are there any relevant conflicts of inte	erest? ✓ Yes [	No	
If yes, please fill out the appropriate in	nformation below.		
Name of Entity	Grant? Person	Non-Financial Support?	Other? Comments
bvie			
1S			
nssen			
lead	<b>✓</b>		
SD			

Aghemo 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume
Section 5. Relationships not covered above
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Dr. Aghemo reports personal fees from Abbvie, personal fees from BMS, personal fees from Janssen, grants and personal fees from Gilead, personal fees from MSD, outside the submitted work; .

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Aghemo 3



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McHUTCHISON 1



Section 1. Identifying Info	rmation	
Given Name (First Name)  JOHN	Surname (Last Name)     McHUTCHISON	3. Date 22-September-2016
4. Are you the corresponding author?	Yes  ✓ No	Corresponding Author's Name  MASSIMO COLOMBO
5. Manuscript Title Treatment with Ledipasvir-Sofosbuv Infection: A Randomized Trial	ir for 12 or 24 weeks in Kidney	Transplant Recipients with Chronic Genotype 1 or 4 HCV
6. Manuscript Identifying Number (if you M16-1205	ı know it)	
Section 2. The Work Under	Consideration for Publica	
	ing but not limited to grants, data	third party (government, commercial, private foundation, etc.) for a monitoring board, study design, manuscript preparation,
Section 3. Relevant financi	al activities outside the su	ıbmitted work.
of compensation) with entities as de-	scribed in the instructions. Use report relationships that were erest?	ther you have financial relationships (regardless of amount one line for each entity; add as many lines as you need by present during the 36 months prior to publication.
Name of Entity	Grant? Personal Non-	Financial Other? Comments
Gilead Sciences		Employee and Stockholder of
Section 4. Intellectual Prop	erty Patents & Copyrigl	nts
Do you have any patents, whether pl	anned, pending or issued, bro	adly relevant to the work? ☐ Yes ✓ No

McHUTCHISON 2



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Dr. McHUTCHISON reports other from Gilead Sciences, outside the submitted work; .

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Pol 1



Section 1. Identifying Inform	nation		
Given Name (First Name)     Stanislas	2. Surname (Last Name) Pol		3. Date 22-September-2016
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Auth	
<ul><li>5. Manuscript Title</li><li>"Treatment with Ledipasvir-Sofosbuvir Infection: A Randomized Trial"</li><li>6. Manuscript Identifying Number (if you known)</li></ul>		ey Transplant Recipie	ents with Chronic Genotype 1 or 4 HCV
Infection: A Randomized Trial"		_	
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any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	g but not limited to grants, doest?  Yes  No Dormation below. If you have	ata monitoring board, s	nent, commercial, private foundation, etc.) for tudy design, manuscript preparation, etc.) situation to add a row.
Name of Institution/Company	Grant	n-Financial Other	Comments
Gilead	<b>✓</b>		Advisory board
BMS	<b>✓</b>		Advisory board
Abbvie	<b>✓</b>		Advisory board
MSD	<b>V</b>		Advisory board
Novartis	<b>✓</b>		Advisory board
Section 3. Relevant financial	activities outside the	submitted work.	
Place a check in the appropriate boxes of compensation) with entities as descr clicking the "Add +" box. You should re Are there any relevant conflicts of interest.	ibed in the instructions. U port relationships that we	se one line for each e	

Pol 2



Soutien A
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Dr. Pol reports grants and personal fees from Gilead, grants and personal fees from BMS, grants and personal fees from Abbvie, grants and personal fees from MSD, grants and personal fees from Novartis, during the conduct of the study; .

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Peck-Radosavljevic 1



Section 1. Identifying Inform			
Identifying Inform	nation		
1. Given Name (First Name) Markus	2. Surname (Last Name) Peck-Radosavljevic		3. Date 26-September-2016
4. Are you the corresponding author?	Yes ✓ No	Corresponding Autho	or's Name
5. Manuscript Title "Treatment with Ledipasvir-Sofosbuvir Infection: A Randomized Trial"	for 12 or 24 weeks in Kidn	ey Transplant Recipier	nts with Chronic Genotype 1 or 4 HCV
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Are there any relevant conflicts of inter	rest? 🗸 Yes 🗌 No		
If yes, please fill out the appropriate inf Excess rows can be removed by pressing		e more than one enti	ty press the "ADD" button to add a row.
Name of Institution/Company	Grant'	n-Financial Other?	Comments
Gilead Sciences	<b>✓</b>		
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Place a check in the appropriate boxes of compensation) with entities as desc clicking the "Add +" box. You should re	ribed in the instructions. Use port relationships that we	se one line for each en	itity; add as many lines as you need by
Are there any relevant conflicts of inter- If yes, please fill out the appropriate inf			
, es, pieuse iii out the appropriate iii	odion below.		
Name of Entity	Granic	n-Financial other?	Comments
Gilead Sciences			
BMS		<b>✓</b>	
AbbVie	<b>✓</b>		

Peck-Radosavljevic 2



Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other? Comments			
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Section 4. Intellectual Bronout						
Intellectual Propert	y Patents & Cop	yrights				
Do you have any patents, whether plann	ed, pending or issue	d, broadly releva	nt to the work? Ye	es 🗸 No		
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Dr. Peck-Radosavljevic reports grants fro Sciences, personal fees and non-financia Jansen, outside the submitted work;.						

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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

Massetto 1



Section 1.	dentifying Inform	ation				
1. Given Name (First N Benedetta	, ,	Surname (Last National Massetto)	me)		3. Date 29-September-2016	
4. Are you the corresp	oonding author?	Yes No				
5. Manuscript Title Treatment with Led Infection: A Randon	•	or 12 or 24 weeks in I	Kidney Transplan	t Recipients w	vith Chronic Genotype 1 or 4 HCV	
6. Manuscript Identify M16-1205	ying Number (if you kn	ow it)				
Section 2.						
Jection 2. Ti	he Work Under Co	onsideration for P	ublication			
	nitted work (including .)?	but not limited to gran			commercial, private foundation, etc.) f design, manuscript preparation,	for
Section 3. Ro	elevant financial	activities outside	the submitted	work.		
of compensation) w	ith entities as descri box. You should rep ant conflicts of intere	bed in the instructio port relationships that est?  Yes	ns. Use one line f	or each entity	relationships (regardless of amoun ; add as many lines as you need by months prior to publication.	
Name of Entity		Grant? Personal Fees?	Non-Financial Support?	Other? Co	omments	
Gilead Sciences				<b>√</b> Emp	ployee and stockholder	
c :: .						
Section 4. In	tellectual Proper	ty Patents & Co	pyrights			
Do you have any pa	tents, whether plani	ned, pending or issue	ed, broadly releva	nt to the wor	k? Yes Vo	

Massetto 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
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Massetto reports personal fees and other from Gilead Sciences, outside the submitted work; .

## **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

Massetto 3



#### **Instructions**

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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

Liu 1



Section 1. Identifying Info	rmation						
1. Given Name (First Name) Hong	2. Surname (Last Name) Liu	3. Date 02-October-2016					
4. Are you the corresponding author?	✓ Yes No						
<ul> <li>5. Manuscript Title         Treatment with Ledipasvir-Sofosbuvir for 12 or 24 weeks in Kidney Transplant Recipients with Chronic Genotype 1 or 4 HCV Infection: A Randomized Trial     </li> <li>6. Manuscript Identifying Number (if you know it)</li> </ul>							
Section 2. The Work Under	Consideration for Publication						
any aspect of the submitted work (include statistical analysis, etc.)? Are there any relevant conflicts of int	ling but not limited to grants, data monitoring bo	overnment, commercial, private foundation, etc.) for oard, study design, manuscript preparation,					
Section 3. Relevant financi	al activities outside the submitted wo	ork.					
of compensation) with entities as de- clicking the "Add +" box. You should Are there any relevant conflicts of int	scribed in the instructions. Use one line for e report relationships that were <b>present dur</b> i	financial relationships (regardless of amount each entity; add as many lines as you need by ing the 36 months prior to publication.					
Section 4. Intellectual Prop	perty Patents & Copyrights						
Do you have any patents, whether pl	anned, pending or issued, broadly relevant	to the work? Yes V No					

Liu 2



Section 5.	Deletionshing not severed above
	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
Yes, the follow	ving relationships/conditions/circumstances are present (explain below):
✓ No other relat	tionships/conditions/circumstances that present a potential conflict of interest
	inuscript 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.
Section 6.	Disclosure Statement
Based on the abo below.	ve disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Hong Liu has not	thing to disclose.

## **Evaluation and Feedback**

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Liu 3



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

Dvory-Sobol 1



Section 1.	Identifying Inform	nation						
1. Given Name (Fi Hadas	rst Name)	2. Surname (Last Name) Dvory-Sobol		3. Date 04-October-2016				
4. Are you the cor	responding author?	Yes  ✓ No		Corresponding Author's Name  Massimo Colombo				
5. Manuscript Title Treatment with I Infection: A Rand	Ledipasvir-Sofosbuvir f	or 12 or 24 weeks in Kidn	ey Transplant Recipier	nts with Chronic Genotype 1 or 4 H	CV			
6. Manuscript Idei M16-1205	ntifying Number (if you kr	now it)						
	ı							
Section 2.	The Work Under C	onsideration for Publ	ication					
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, o	. , .	ent, commercial, private foundation, e cudy design, manuscript preparation,	tc.) for			
Section 3.	Relevant financial	activities outside the	submitted work.					
of compensation	n) with entities as descri	ibed in the instructions. l	Jse one line for each e	cial relationships (regardless of am ntity; add as many lines as you nee e 36 months prior to publication	d by			
Are there any rel	evant conflicts of intere	est? ✓ Yes No						
If yes, please fill o	out the appropriate info	ormation below.		_				
Name of Entity		Grant	on-Financial Support?	Comments				
Gilead Science				Gilead Science employee and own stocks				
Section 4.	Intellectual Proper	rty Patents & Copyr	ights					
Do you have any	patents, whether plan	ned, pending or issued, k	proadly relevant to the	work? Yes Vo				

Dvory-Sobol 2



Section 5. Relationships 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):
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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.
Dr. Dvory-Sobol reports other from Gilead Science, outside the submitted work; .

## **Evaluation and Feedback**

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Dvory-Sobol 3



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Hyland 1



Section 1.	Identifying Inform	ation					
1. Given Name (Fi Robert	rst Name)	2. Surname (Last Na Hyland	me)		3. Date 22-Septemb	per-2016	
4. Are you the cor	responding author?	✓ Yes No					
Infection: A Rand	_edipasvir-Sofosbuvir fo		Kidney Transplan	it Recipients w	vith Chronic Ge	notype 1 or 4 HC\	/
Section 2.	The Work Under Co	onsideration for P	ublication				
any aspect of the s statistical analysis, Are there any rel If yes, please fill c	etitution <b>at any time</b> recei ubmitted work (including etc.)? evant conflicts of intere out the appropriate info be removed by pressing	but not limited to gradest? Yes ormation below. If yo	nts, data monitorin No	g board, study	design, manuscri	ipt preparation,	
Name of Institut		Grant? Personal Fees?	Non-Financial	Other? Co	omments		
Gilead Sciences, Inc.				Emp	ployee and stock	holder	
	ı						
Section 3.	Relevant financial	activities outside	the submitted	work.			
of compensation clicking the "Add Are there any rel	the appropriate boxes in the appropriate boxes in the second of the seco	bed in the instructio port relationships tha	ns. Use one line f	or each entity	; add as many li	ines as you need l	
Section 4.	Intellectual Proper	ty Patents & Co	pyrights				
Do you have any	patents, whether plans	ned, pending or issu	ed, broadly releva	ant to the wor	rk? Yes	✓ No	

Hyland 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
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Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Hyland repor	ts personal fees from Gilead Sciences, Inc., during the conduct of the study; .

## **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

Hyland 3



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Yun 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Chohee	2. Surname (Last Name) Yun		3. Date 22-September-2016
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Autho	or's Name
5. Manuscript Title Treatment with Ledipasvir-Sofosbuvir f Infection: A Randomized Trial	or 12 or 24 weeks in Kidne	y Transplant Recipien	ts with Chronic Genotype 1 or 4 HCV
6. Manuscript Identifying Number (if you k	now it)		
Section 2. The Work Under C	onsideration for Public	cation	
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of inter-	g but not limited to grants, da		ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes of compensation) with entities as descr clicking the "Add +" box. You should re Are there any relevant conflicts of interesting the second	ibed in the instructions. Use port relationships that werest?	se one line for each en re <b>present during the</b>	itity; add as many lines as you need by
Name of Entity	Grant? Personal Not	n-Financial other?	Comments
Gilead Sciences Inc.			I am an employee of Gilead Sciences Inc. and own company stocks.
Section 4. Intellectual Prope	rty Patents & Copyri	ghts	
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the	work? Yes No

Yun 2



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Disclosure Statement
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Dr. Yun reports other from Gilead Sciences Inc., outside the submitted work; .

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Yun 3



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Brainard 1



Section 1.	Identifying Inform	ation					
1. Given Name (Fi Diana	rst Name)	2. Surname (Last Brainard	Name)		3. Date 22-Septem	ber-2016	
4. Are you the cor	responding author?	Yes ✓ N	·	nding Author's N Colombo	Name		
Infection: A Ranc 6. Manuscript Ider	_edipasvir-Sofosbuvir fo		n Kidney Transplan	nt Recipients w	vith Chronic Ge	enotype 1 or 4 HO	2V
M16-1205							
Section 2.	The Work Under Co	onsideration fo	Publication				
any aspect of the s statistical analysis, Are there any rel If yes, please fill o	etitution <b>at any time</b> recein ubmitted work (including etc.)? evant conflicts of intere out the appropriate info be removed by pressing	but not limited to gest? Yes [ ormation below. If	rants, data monitorin	ig board, study	design, manusci	ript preparation,	
Name of Institut	, .	Grant? Persor		Other? Co	omments		
Gilead Sciences, Inc.				<b>✓</b> Em	ployee and stocl	kholder	
Section 3.	Relevant financial	activities outsion	le the submitted	work.			
of compensation clicking the "Add	the appropriate boxes i ) with entities as descri   +" box. You should rep evant conflicts of intere	bed in the instructort relationships	tions. Use one line f	for each entity	; add as many	lines as you need	d by
Section 4.	Intellectual Proper	ty Patents & (	Copyrights				
Do you have any	patents, whether plan	ned, pending or is	sued, broadly releva	ant to the wor	rk? Yes	<b>√</b> No	

Brainard 2



Soction F	
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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Brainard 3



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1. Given Name (First Name) 2. Surname (Last Name) 3. Date bourliere 10-April-2016  4. Are you the corresponding author?	Section 1. Identifying Inform	nation		
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.) from any spect 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 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  No  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  No  If yes, please fill out the appropriate information below.  Name of Entity  Grant?  Personal  Non-Financial  Other?  Comments  Fees?  Support?  Comments  Fees?  Support?  Comments  Fees?  Support?  Comments  Fees?  Comments	1. Given Name (First Name)	2. Surname (Last Name)		
Treatment with Ledipasvir-Sofosbuvir for 12 or 24 weeks in Kidney Transplant Recipients with Chronic Genotype 1 or 4 HCV Infection: A Randomized Trial"  6. Manuscript Identifying Number (if you know it)  M16-1205  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.) from 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 rove Excess rows can be removed by pressing the "X" button.  Name of Institution/Company  Grant? Personal Fees? Support?  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 No  If yes, please fill out the appropriate information below.  Name of Entity  Grant? Personal Fees? Non-Financial Support? Comments  Support? Comments  Support? Comments  Support? Comments  Support? Comments  Support? Given lecture	4. Are you the corresponding author?	☐ Yes ✓ No		or's Name
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?	Treatment with Ledipasvir-Sofosbuvir f	or 12 or 24 weeks in Kidne	y Transplant Recipien	its with Chronic Genotype 1 or 4 HCV
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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?		Fees? S	_ Otner•	Comments
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MSD Given lecture	Name of Entity	Grant	Other•	Comments
	Gilead	<b>V V</b>		
	MSD BMS			



Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments	
Janssen		<b>√</b>		<b>√</b>	Given Lecture	
Abbvie		<b>√</b>		<b>✓</b>	Given lecture	
Roche		<b>√</b>				
Boehringer Ingelheim		<b>✓</b>				
Section 4. Intellectual Propert  Do you have any patents, whether plann	•	•		nt to the	work? Yes V No	
Section 5. Relationships not c	overed a	bove				
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	itions/circ	umstance	s are present (exp	olain belo	ow):	
✓ No other relationships/conditions/cir	cumstanc	es that pre	esent a potential o	conflict o	finterest	
At the time of manuscript acceptance, jo On occasion, journals may ask authors to					•	ents.
Section 6. Disclosure Stateme	nt					
Based on the above disclosures, this form below.	n will auto	matically (	generate a disclos	sure state	ment, which will appear in the box	
Dr. bourliere reports personal fees from Gilead, personal fees and other from MS personal fees and other from Abbvie, pesubmitted work; .	D, persona	al fees and	other from BMS,	personal	fees and other from Janssen,	



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Zhang 1



Section 1. Identifying Inforn	nation						
1. Given Name (First Name) Jie	2. Surname (Last Name) Zhang	3. Date					
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Massimo Colombo					
5. Manuscript Title Treatment with Ledipasvir-Sofosbuvir f Infection: A Randomized Trial	or 12 or 24 weeks in Kidne	y Transplant Recipients with Chronic Genotype 1 or 4 HCV					
6. Manuscript Identifying Number (if you ki M16-1205	now it)	_					
Section 2. The Work Under C							
The Work Under C	onsideration for Public	cation					
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Section 3. Relevant financial	activities outside the s	submitted work.					
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Name of Entity	Grant? Personal Nor	n-Financial other? Comments					
Gilead Sciences		<b>▼</b> Employee and Stock Holder					
Section 4. Intellectual Prope	rty Patents & Copyric	yhts					
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo							

Zhang 2



Section 5. Relationships not severed above					
Relationships not covered above					
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Section 1								
Section 1. Identifying Information								
Given Name (First Name)     Michael	2. Surname (Last Name) Manns		3. Date 20-October-2016					
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Autho Massimo Colombo	r's Name					
5. Manuscript Title Treatment with Ledipasvir-Sofosbuvir f Infection: A Randomized Trial	or 12 or 24 weeks in Kidne	y Transplant Recipien	ts with Chronic Genotype 1 or 4 HCV					
6. Manuscript Identifying Number (if you kr M16-1205	now it)	_						
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Did you or your institution <b>at any time</b> receany aspect of the submitted work (including statistical analysis, etc.)?								
Are there any relevant conflicts of interest								
If yes, please fill out the appropriate info Excess rows can be removed by pressin		e more than one entit	ty press the "ADD" button to add a row.					
Name of Institution/Company	Grant'	n-Financial other?	Comments					
Gilead Sciences	<b>✓</b>							
Section 3. Relevant financial	activities outside the s	submitted work.						
Place a check in the appropriate boxes of compensation) with entities as descr clicking the "Add +" box. You should re	ibed in the instructions. Us port relationships that wer	se one line for each en	tity; add as many lines as you need by					
Are there any relevant conflicts of interest the appropriate infe								
If yes, please fill out the appropriate info	omation below.							
Name of Entity	Grant'	n-Financial other?	Comments					
Roche	<b>✓</b>							
Bristol Myers Squibb	<b>✓</b>							
Gilead Sciences	<b>✓</b>							



Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments			
Boehringer Ingelheim	<b>✓</b>	<b>✓</b>						
Novartis	<b>✓</b>	<b>✓</b>						
Merck (MSD)	✓	<b>✓</b>						
Janssen	✓	<b>✓</b>						
GlaxoSmithKline	✓	<b>✓</b>						
Biotest	<b>✓</b>	<b>✓</b>						
AbbVie	✓	$\checkmark$						
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Relationships not o	overed	above						
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Section 6. Disclosure Stateme					·			
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.								

Dr. Manns reports grants from Gilead Sciences, during the conduct of the study; grants and personal fees from Roche, grants and personal fees from Bristol Myers Squibb, grants and personal fees from Gilead Sciences, grants and personal fees from Boehringer Ingelheim, grants and personal fees from Novartis, grants and personal fees from Merck (MSD), grants and personal fees from Janssen, grants and personal fees from GlaxoSmithKline, grants and personal fees from Biotest, grants and personal fees from AbbVie, outside the submitted work;



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