

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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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4. Intellectual Property.

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

5. Relationships not covered above.

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Nathan	2. Surname (Last Name) Morris	3. Date 13-May-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ollie Jay
5. Manuscript Title The effects of electric fan use under differing resting heat index conditions: A clinical trial		
6. Manuscript Identifying Number (if you know it) M19-0512		

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

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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Section 6. Disclosure Statement

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Dr. Morris has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Timothy

2. Surname (Last Name)

English

3. Date

14-May-2019

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Ollie Jay

5. Manuscript Title

The effects of electric fan use under differing resting heat index conditions: A clinical trial

6. Manuscript Identifying Number (if you know it)

M19-0512

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Section 6. Disclosure Statement

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Dr. English has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Ollie

2. Surname (Last Name)
Jay

3. Date
08-June-2019

4. Are you the corresponding author? Yes No

5. Manuscript Title
The effects of electric fan use under differing resting heat index conditions: A clinical trial

6. Manuscript Identifying Number (if you know it)
M19-0512

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
NSW Office of Environment & Heritage Human Health and Social Impacts Node	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
National Health and Medical Research Council	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$1.1 M, 5-year NHMRC Project grant received in Jan.2018 for study assessing optimal low-cost cooling strategies for vulnerable people during heatwaves

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Jay reports grants from NSW Office of Environment & Heritage Human Health and Social Impacts Node, during the conduct of the study; grants from National Health and Medical Research Council, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Lily	2. Surname (Last Name) Hospers	3. Date 15-May-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ollie Jay
5. Manuscript Title The effects of electric fan use under differing resting heat index conditions: A clinical trial		
6. Manuscript Identifying Number (if you know it) M19-0512.		

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Dr. Hospers has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Anthony	2. Surname (Last Name) Capon	3. Date 11-June-2019
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Corresponding Author's Name _____		
5. Manuscript Title The effects of electric fan use under differing resting heat index conditions: A clinical trial		
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Dr. Capon has nothing to disclose.

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