

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

Identifying information.

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earning royalties or not

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

Whelan 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi	rst Name)	2. Surname (Last Na Whelan	ame)	3. Date 18-August-2020
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's	Name
5. Manuscript Title Salivary Detection				
6. Manuscript Ider M20-4738	ntifying Number (if you kr	now it)		
Section 2.	The Work Under C	onsideration for	Publication	
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to gra	es from a third party (government, ants, data monitoring board, study] No	, commercial, private foundation, etc.) for , design, manuscript preparation,
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 Vo				
Section 4.	Intellectual Prope	rty Patents & Co	opyrights	
Do you have any	patents, whether plan	ned, pending or issu	ued, broadly relevant to the wo	ork? Yes 🗸 No

Whelan 2



Section 5. Relationships not severed above
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Mr. Whelan has nothing to disclose.

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Angel 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fii Jonathan	rst Name)	2. Surname (Last Name) Angel	3. Da 18-A	ate August-2020
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Stephanie Johnson	
5. Manuscript Title Salivary Detection				
6. Manuscript Ider M20-4738	ntifying Number (if you kr	now it)		
Section 2.	The Work Under Co	onsideration for Publi	cation	
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of compensation clicking the "Add) with entities as descri	ibed in the instructions. Uport relations hips that we	nether you have financial relations se one line for each entity; add as re present during the 36 month	many lines as you need by
Section 4.	Intellectual Proper	rty Patents & Copyri	ghts	
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the work?	Yes 🗸 No

Angel 2



Section 5.	
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Caulley 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Lisa	rst Name)	2. Surname (Last Name) Caulley	3. Date 19-August-2020
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Name Stephanie Johnson-Obaseki
5. Manuscript Title Salivary Detection			
6. Manuscript Ide M20-4738	ntifying Number (if you kr	now it)	_
Section 2.	The Work Under C	onsideration for Public	cation
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Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

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Bastien 1



Section 1.	Identifying Inform	nation	
1. Given Name (First Name) 2. Surname (Last Name) Nathalie Bastien		3. Date 25-August-2020	
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Stephanie Johnson-Obaseki
5. Manuscript Title Salivary Detection			
6. Manuscript Ider M20-4738	ntifying Number (if you kr	now it)	
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Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

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Section 1. Identifying Info	ormation	
1. Given Name (First Name) MART(ル	2. Surname (Last Name)	3. Date AUG 27/202
4. Are you the corresponding author?	Yes No	
5. Manuscript Title Salivary defect 6. Manuscript Identifying Number (if you make) M20 - 4738	is of COVID-19 u know it)	
Did you or your institution at any time	ding but not limited to grants, data monitoring b	overnment, commercial, private foundation, etc.) for board, study design, manuscript preparation,
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Eapen 1



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4. Are you the cor	responding author?	Yes ✓ No	o Corresponding Author's Name
5. Manuscript Title Salivary Detection			
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Eapen 2



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ert testimony, employment, or other affiliations patent n-Financial Support: Examples include drugs/equipment

Johnson-Obaseki 1



Section 1.	Identifying Inform	nation			
Given Name (First Name) Stephanie		2. Surname (Last Name) Johnson-Obaseki		3. Date 26-August-2020	
4. Are you the corresponding author?		✓ Yes No			
5. Manuscript Title Salivary detectio					
6. Manuscript Identifying Number (if you know it) M20-4738					
Section 2.	The Work Under C	onsideration for Public	ation		
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Section 4.	Intellectual Prope	rty Patents & Copyrig	nts		
Do you have any	patents, whether plan	ned, pending or issued, bro	adly relevant to the work?	? ☐ Yes ✓ No	

Johnson-Obaseki 2



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Section 6. Disclosure Statement				
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Antonation 1



Section 1.	Identifying Inform	nation				
1. Given Name (First Name) Kym		2. Surname (Last Name) Antonation	3. Date 19-August-2020			
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Dr. Johnson-Obaseki			
5. Manuscript Title Salivary Detectio						
6. Manuscript Iden	ntifying Number (if you kr	now it)				
Section 2.	Section 2. The Work Under Consideration for Publication					
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Section 4.	Intellectual Proper	rty Patents & Copyri	ghts			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo						

Antonation 2



Section 5. Relationships not sovered above				
Relationships not covered above				
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Poliquin 1



Section 1.	Identifying Inform	nation			
Given Name (First Name) Guillaume		2. Surname (Last Name) Poliquin	3. Date 25-August-2020		
4. Are you the corresponding author?		☐ Yes ✓ No	Corresponding Author's Name Stephanie Johnson-Obaseki		
5. Manuscript Title Salivary Detection of COVID-19					
6. Manuscript Ider M20-4738	ntifying Number (if you kr	now it)			
Section 2.	The Work Under C	onsideration for Public	cation		
Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes No					
Section 3.	Relevant financial	activities outside the s	submitted work.		
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Section 4.	Intellectual Prope	rty Patents & Copyric	ghts		
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No		

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