

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 has five parts.

1. Identifying information.

Each author should submit a separate form. Provide complete information and double-check the manuscript number. If you are NOT the corresponding author please insert his or her name.

2. The work under consideration for publication.

Please provide 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 idea is to provide for the reader information about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. If you check the "No" box it 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 to pay you. If you or your institution did receive funds from a third party to support the work, check "Yes" along with the appropriate boxes to indicate the type of support and whether you or your institution received it.

3. Relevant financial activities outside the submitted work.

Please report all sources of revenue relevant to the submitted work that accrued either directly to you or were paid to your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. If there is any question, it is usually better to disclose a relationship than not to do so. Please note that your interactions with the work's sponsor outside the submitted work should be listed here. For each category list each entity on a separate line. Use as many lines as necessary to provide complete information. In addition, please disclose relationships that fall outside the 36-month window that readers may want to know about and could reasonably criticize you for not disclosing (for example, long-term financial relationships that are now ended).

The goal of this section is to provide information for our reviewers and readers about your interactions with entities in the biomedical 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. For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to benefit financially from the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as the NIH or the MRC, need not be disclosed. For example, if the NIH sponsored a piece of work you have been involved in but drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

4. Financial relationships involving your spouse or partner or your children (under 18 years of age).

If monies from the types of relationships listed in Section 3 were paid to your spouse or partner or dependent children, please list the type of activity and source of the money.

5. Nonfinancial associations.

Please report any personal, professional, political, institutional, religious, or other associations that a reasonable reader would want to know about in relation to the submitted work.



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Effective Date: 13-November-2009

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Surname:

Section 1. Identifying Information.

Given Name:

Board membership

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Type of Relationship (in alphabetical order	No Paid to You	_	Entity	Comments	
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Yes, specify nature	·				
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Did you or your institution	n at any time receive p	payment or suppo		ne submitted work (including b	out not
Section 2. Information	about the suppo	ort of the work	under consideration f	or publication.	
Manuscript Identifying	Number (if you kno	ow it): 09-09142			
Manuscript Title: Mech	anisms of Alzheimer's	Disease			
Corresponding author's	name: Henry Querr	ortn			
Are you the correspon	_				
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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your institution	Entity	Comments	
Expert testimony	\boxtimes					Del ×
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Grants/grants pending	\boxtimes					Del ×
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Payment for development of educational presentations including service on speakers' bureaus						Del ×
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Travel/accommodations expenses covered or reimbursed	\boxtimes					Del ×
						Add +
Other (err on the side of full disclosure)	\boxtimes					Del ×
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Section 4. Information about financial relationships involving your spouse or partner or your children (under 18 years of age).

Do your children or your spouse or partner have financial relationships with entities that have an interest in the content of the submitted work?
No other relationships/conditions/circumstances that present potential conflict of interest
Yes, the following relationships/conditions/circumstances are present (explain below):

Section 5. Information about relevant nonfinancial associations.

Do you have any relevant nonfinancial associations or interests (personal, professional, political, institutional, religious, or other)
that a reasonable reader would want to know about in relation to the submitted work?
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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.

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Querfurth

Effective Date: 04-November-2009

Surname:

Section 1. Identifying Information.

Henry

Given Name:

(or first)		(01 13	ast)		Format example: 07-Augu	
Are you the correspond	ing auth	or? ⊠ Yes	☐ No		Pormat example: 07-Augt	181-2006
Manuscript Title: Mechai	nisms of	Disease-Alzh	eimer's Disease			
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Section 2. Information a					-	
Did you or your institution a limited to grants, data monit	•			, ,	the submitted work (includir llysis, etc)?	ıg but not
⊠ No						
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Section 3. Information a	about r	elevant fir	nancial relat	ionships outside the s	submitted work.	
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Type of Relationship (in alphabetical order)	No	Paid to You	Your institution	Entity	Comments	
Board membership	\boxtimes					Del ×
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Consultancy		\boxtimes		Novartis Pharmaceuticals	Paid lecturer 1995-2006	Del ×
Consultancy		\boxtimes		Forest Pharmaceuticals	Paid lecturer2005-2007	Del ×
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Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your institution	Entity	Comments	
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Gifts	\boxtimes					Del ×
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Grants/grants pending	\boxtimes					Del ×
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Honoraria						Del ×
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Payment for manuscript preparation	\boxtimes					Del ×
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Patents (planned, pending or issued)				Provisional Patent on Drug Discovery for Alzheimer Dis.	No Monetary transactions	Del ×
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Royalties	\boxtimes					Del ×
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Payment for development of educational presentations including service on speakers' bureaus					See above for past 'consultancy' work involving honoraria for lectures sponsored by Novartis and Forest Pharma	Del ×
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Stock/stock options	\boxtimes					Del ×
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Travel/accommodations expenses covered or reimbursed	\boxtimes					Del ×
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Other (err on the side of full disclosure)	\boxtimes					Del ×
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