

ICMJE DISCLOSURE FORM

Date: 25MAY2021
 Your Name: Monica Yang, MD
 Manuscript Title: Circulating CTRP9 is Associated with Severity of Systemic Sclerosis-associated Interstitial Lung Disease
 Manuscript number (if known): ACR-20-1330

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
Time frame: Since the initial planning of the work			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	Rheumatology Research Foundation, Ephraim P. Engleman Endowed Research Preceptorship	Research fellowship provided by Rheumatology Research Foundation to fund statistical and clinical coordinator support for project. No personal salary or gains were made.
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> None	
3	Royalties or licenses	<input checked="" type="checkbox"/> None	

4	Consulting fees	<input checked="" type="checkbox"/> None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please place an "X" next to the following statement to indicate your agreement:

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ICMJE DISCLOSURE FORM

Date: 5/25/2021
Your Name: Lauren C Balmert, PhD
Manuscript Title: Circulating CTRP9 is Associated with Severity of Systemic Sclerosis-associated Interstitial Lung Disease
Manuscript number (if known): ACR-20-1330

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		Rheumatology Research Foundation, Ephraim P. Engleman Endowed Research Preceptorship	Payment made to institution for statistical analyses for the current work (Northwestern Biostatistics Collaboration Center fee-for-service model)
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u>__ X __</u> None	
3	Royalties or licenses	<u>__ X __</u> None	

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ICMJE DISCLOSURE FORM

Date: 25MAY2021
Your Name: Mary Carns
Manuscript Title: Circulating CTRP9 is Associated with Severity of Systemic Sclerosis-associated Interstitial Lung Disease
Manuscript number (if known): ACR-20-1330

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ICMJE DISCLOSURE FORM

Date: 5/25/2021
Your Name: Roberta Goncalves-Marangoni PhD
Manuscript Title: Circulating CTRP9 is Associated with Severity of Systemic Sclerosis-associated Interstitial Lung Disease
Manuscript number (if known): ACR-20-1330

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		___ X ___ None	
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4	Consulting fees	_ X ___ None	

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ICMJE DISCLOSURE FORM

Date: 5/25/2021

Your Name: Benjamin Korman, MD, PhD

Manuscript Title: Circulating CTRP9 is Associated with Severity of Systemic Sclerosis-associated Interstitial Lung Disease

Manuscript number (if known): ACR-20-1330

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Date: 5/25/2021
Your Name: Monique Hinchcliff, MD, MS
Manuscript Title: Circulating CTRP9 is Associated with Severity of Systemic Sclerosis-associated Interstitial Lung Disease
Manuscript number (if known): ACR-20-1330

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3	Royalties or licenses	<input checked="" type="checkbox"/> None	
4	Consulting fees	Boehringer Ingelheim	Consulting fees Summer 2020

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
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ICMJE DISCLOSURE FORM

Date: 5/25/2021

Your Name: John Varga, MD

Manuscript Title: Circulating CTRP9 is Associated with Severity of Systemic Sclerosis-associated Interstitial Lung Disease

Manuscript number (if known): ACR-20-1330

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