

ICMJE Form for Disclosure of Potential Conflicts of Interest

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.

1. Identifying information.

2. The work under consideration for publication.

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".

3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical 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.

Report all sources of revenue paid (or promised to be paid) directly to you or 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. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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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.

Use this section to report 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.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

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Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

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

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Section 1. Identifying Information

1. Given Name (First Name)
Edward

2. Surname (Last Name)
Wild

3. Date
15-February-2015

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Dr Douglas Macdonald

5. Manuscript Title
Mutant huntingtin protein in Huntington's disease cerebrospinal fluid

6. Manuscript Identifying Number (if you know it)
80743-CMED-RV-2

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

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
Medical Research Council UK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	UK Government agency
National Institutes for Health Research	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	UK Government agency
Academy of Medical Sciences	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	UK non-profit agency
CHDI Foundation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	US non-profit foundation

Section 3. Relevant financial activities outside the submitted work.

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
European Huntington's Disease Network	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-profit entity
GSK Inc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Academic research grant
Shire Pharmaceuticals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Scientific consultancy; fee diverted to my employer
ISIS Pharmaceuticals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Scientific consultancy; fee diverted to my employer

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

Section 5. Relationships not covered above

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Dr. Wild reports grants from Medical Research Council UK, grants from National Institutes for Health Research , grants from Academy of Medical Sciences, grants from CHDI Foundation, during the conduct of the study; grants from European Huntington's Disease Network, grants from GSK Inc., other from Shire Pharmaceuticals, other from ISIS Pharmaceuticals, outside the submitted work; .

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Section 1. Identifying Information

1. Given Name (First Name)

Roberto

2. Surname (Last Name)

Boggio

3. Date

15-February-2015

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Dr Douglas Macdonald

5. Manuscript Title

Mutant huntingtin protein in Huntington's disease cerebrospinal fluid

6. Manuscript Identifying Number (if you know it)

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Dr. Boggio has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Douglas 2. Surname (Last Name) Langbehn 3. Date 15-February-2015

4. Are you the corresponding author? Yes No Corresponding Author's Name
Dr Douglas Macdonald

5. Manuscript Title
Mutant huntingtin protein in Huntington's disease cerebrospinal fluid

6. Manuscript Identifying Number (if you know it)
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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
CHDI	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consulting contracts

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University College London	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HD grant subcontract
Qualitative Research Analysis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One-time consulting fee for opinions as an HD researcher

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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Langbehn reports other from CHDI, during the conduct of the study; other from University College London, personal fees from Qualitative Research Analysis, 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) Nicola	2. Surname (Last Name) Robertson	3. Date 15-February-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr Douglas Macdonald
5. Manuscript Title Mutant huntingtin protein in Huntington's disease cerebrospinal fluid		
6. Manuscript Identifying Number (if you know it) 80743-CMED-RV-2		

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Ms. Robertson has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) James

2. Surname (Last Name) Miller

3. Date 15-February-2015

4. Are you the corresponding author? Yes No Corresponding Author's Name Dr Douglas Macdonald

5. Manuscript Title Mutant huntingtin protein in Huntington's disease cerebrospinal fluid

6. Manuscript Identifying Number (if you know it) 80743-CMED-RV-2

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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Medical Research Council UK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	UK Government agency
Rosetrees Trust	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	UK non-profit entity

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Mr. Miller reports grants from Medical Research Council UK, grants from Rosetrees Trust, during the conduct of the study; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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) Salman	2. Surname (Last Name) Haider	3. Date 15-February-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr Douglas Macdonald
5. Manuscript Title Mutant huntingtin protein in Huntington's disease cerebrospinal fluid		
6. Manuscript Identifying Number (if you know it) 80743-CMED-RV-2		

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

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Haider 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)
Henrik

2. Surname (Last Name)
Zetterberg

3. Date
15-February-2015

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Dr Douglas Macdonald

5. Manuscript Title
Mutant huntingtin protein in Huntington's disease cerebrospinal fluid

6. Manuscript Identifying Number (if you know it)
80743-CMED-RV-2

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

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
Swedish Research Council	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Swedish Government agency
Knut and Alice Wallenberg Foundation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Swedish non-profit entity

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

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Zetterberg reports grants from Swedish Research Council , grants from Knut and Alice Wallenberg Foundation, during the conduct of the study; .

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Section 1. Identifying Information

1. Given Name (First Name) Blair	2. Surname (Last Name) Leavitt	3. Date 15-February-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr Douglas Macdonald
5. Manuscript Title Mutant huntingtin protein in Huntington's disease cerebrospinal fluid		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) _____ Rainer

2. Surname (Last Name) _____ Kuhn

3. Date _____ 15-February-2015

4. Are you the corresponding author? Yes No Corresponding Author's Name _____
Dr Douglas Macdonald

5. Manuscript Title _____
Mutant huntingtin protein in Huntington's disease cerebrospinal fluid

6. Manuscript Identifying Number (if you know it) _____
80743-CMED-RV-2

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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
CHDI Foundation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	US Non-profit foundation

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
Evotec International	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Salary
CHDI Management Inc	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consultancy; fee paid to my employer, Redbark GmbH
Novartis Venture Fund	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consultancy; fee paid to my employer, Redbark GmbH

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Satter Investment Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consultancy; fee paid to my employer, Redbark GmbH
Piqur Therapeutics AG	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consultancy; fee paid to my employer, Redbark GmbH
NCL Foundation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consultancy; fee paid to my employer, Redbark GmbH
Redbark GmbH	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Former employer

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Dr. Kuhn reports grants from CHDI Foundation, during the conduct of the study; other from Evotec International, other from CHDI Management Inc, other from Novartis Venture Fund, other from Satter Investment Management, other from Piqur Therapeutics AG , other from NCL Foundation, personal fees from Redbark GmbH, 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)
Sarah

2. Surname (Last Name)
Tabrizi

3. Date
15-February-2015

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Dr Douglas Macdonald

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Are there any relevant conflicts of interest? Yes No

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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Medical Research Council UK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	UK Government agency
CHDI Foundation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	US non-profit foundation

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European Huntington's Disease Network	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-profit entity
GSK Inc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Academic research grant

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Shire Pharmaceuticals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Scientific consultancy; fee diverted to my employer
ISIS Pharmaceuticals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Scientific consultancy; fee diverted to my employer
Wellcome Trust	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	UK non-profit agency
EU FP7 Health Call	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EU Government agency
Huntington's Disease Association	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	UK non-profit agency
Dementia and Neurodegenerative Disease Network UK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	UK Government agency
UCL/UCLH Biomedical Research Centre and BBSRC	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Academic institute distributing government funds
Siena Biotech	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Scientific consultancy; fee diverted to my employer
Simon Kucher Partnership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Scientific consultancy; fee diverted to my employer
Roche	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Scientific consultancy; fee diverted to my employer
Takeda Pharmaceuticals International	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Scientific consultancy; fee diverted to my employer
Novartis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Scientific consultancy; fee diverted to my employer
Sanofi-Aventis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Scientific consultancy; fee diverted to my employer
The Wellcome Trust	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Scientific consultancy; fee diverted to my employer
GSK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Scientific consultancy; fee diverted to my employer
TEVA Pharmaceuticals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Scientific consultancy; fee diverted to my employer

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Tabrizi reports grants from Medical Research Council UK, grants from CHDI Foundation, during the conduct of the study; grants from European Huntington's Disease Network, grants from GSK Inc., other from Shire Pharmaceuticals, other from ISIS Pharmaceuticals, grants from Wellcome Trust, grants from EU FP7 Health Call, grants from Huntington's Disease Association, grants from Dementia and Neurodegenerative Disease Network UK, grants from UCL/UCLH Biomedical Research Centre and BBSRC, other from Siena Biotech, other from Simon Kucher Partnership, other from Roche, other from Takeda Pharmaceuticals International, other from Novartis, other from Sanofi-Aventis, other from The Wellcome Trust, other from GSK, other from TEVA Pharmaceuticals, outside the submitted work; .

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1. Identifying information.

2. The work under consideration for publication.

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".

3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical 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.

Report all sources of revenue paid (or promised to be paid) directly to you or 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. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by 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 government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

4. Intellectual Property.

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

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Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

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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

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Section 1. Identifying Information

1. Given Name (First Name)
Douglas

2. Surname (Last Name)
Macdonald

3. Date
15-February-2015

4. Are you the corresponding author? Yes No

5. Manuscript Title
Mutant huntingtin protein in Huntington's disease cerebrospinal fluid

6. Manuscript Identifying Number (if you know it)
80743-CMED-RV-2

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

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Macdonald has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Andreas	2. Surname (Last Name) Weiss	3. Date 15-February-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Dr Douglas Macdonald
5. Manuscript Title Mutant huntingtin protein in Huntington's disease cerebrospinal fluid		
6. Manuscript Identifying Number (if you know it) 80743-CMED-RV-2		

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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Dr. Weiss has nothing to disclose.

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