

Instructions

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| 1. Given Name (First Name) Marcas | 2. Surname (Last Name) Bamman | 3. Date 20-Septemb |
|--|----------------------------------|---|
| 4. Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon |
| 5. Manuscript Title SARS-CoV-2 Transmission among Mar | ine Recruits during Quara | intine |
| 6. Manuscript Identifying Number (if you 20-29717 | know it) | |

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🖌 No

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Dr. Bamman has nothing to disclose.

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| Section 1. | Identifying Infor | mation | |
|---------------------------------------|-------------------------|---------------------------------|---|
| 1. Given Name (Fi Jayeeta | rst Name) | 2. Surname (Last Name) Dutta | 3. Date 20-September-2020 |
| 4. Are you the cor | responding author? | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon |
| 5. Manuscript Titl SARS-CoV-2 Trai | | rine Recruits during Quara | ntine |
| 6. Manuscript Ide 20-29717 | ntifying Number (if you | know it) | |

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|---|--|-----|--------------|----|

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Mrs. Dutta has nothing to disclose.

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| Section 1. Identifying | g Information | |
|--|----------------------------------|---|
| 1. Given Name (First Name) Ethan | 2. Surname (Last Name) Ellis | 3. Date 20-September-2020 |
| 4. Are you the corresponding aut | hor? Yes 🗸 No | Corresponding Author's Name Stuart Sealfon |
| 5. Manuscript Title SARS-CoV-2 Transmission amo | ong Marine Recruits during Quara | ntine |
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| 1. Given Name (Fi Luis | rst Name) | 2. Surname (Last Name) Estrella | | Date -September-2020 |
| 4. Are you the corresponding author? | | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon | |
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| 1. Given Name (First Name) Yongchao | 2. Surname (Last Name) Ge | 3. Date 20-September-2020 |
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| Section 1. Identifying I | oformation | |
|--|----------------------------------|---|
| 1. Given Name (First Name) Mary Catherine | 2. Surname (Last Name) George | 3. Date 21-September-2020 |
| 4. Are you the corresponding author | ? Yes 🖌 No | Corresponding Author's Name Stuart Sealfon |
| 5. Manuscript Title SARS-CoV-2 Transmission among | Marine Recruits during Quara | intine |
| 6. Manuscript Identifying Number (if 20-29717 | you know it) | |

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.)?

🖌 No

| Are there any relevant conflicts of interest? | | Yes |
|---|--|-----|
|---|--|-----|

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| Are there any relevant conflicts of interest? | | Yes | \checkmark | No |
|---|--|-----|--------------|----|
|---|--|-----|--------------|----|

| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? | Yes | 🖌 No | |
|--|-----|------|--|
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Section 5. Relationships not covered above

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Dr. George has nothing to disclose.

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| Section 1. Identifying Info | rmation | | |
|---|-----------------------------------|--|------------------------------|
| 1. Given Name (First Name) Carl | 2. Surname (Last Name) Goforth | | 3. Date 21-September-2020 |
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🖌 No

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| Section 1. | Identifying Infor | mation | | |
|---------------------------------------|-------------------------|--|---|------------------------------|
| 1. Given Name (Fi Ana | irst Name) | 2. Surname (Last Name Gonzalez-Reiche |) | 3. Date 20-September-2020 |
| 4. Are you the cor | responding author? | Yes 🖌 No | Corresponding Author's Na Stuart Sealfon | me |
| 5. Manuscript Titl SARS-CoV-2 Trai | | ine Recruits during Quar | antine | |
| 6. Manuscript Ide 20-29717 | ntifying Number (if you | know it) | | |

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|---|-----|--------------|----|
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| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? | | Yes | V No | 0 |
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| Section 1. Identifying Infor | mation | | |
|--|----------------------------------|--|------------------------------|
| 1. Given Name (First Name) William | 2. Surname (Last Name) Graham | | 3. Date 20-September-2020 |
| 4. Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Nar Stuart Sealfon | ne |
| 5. Manuscript Title SARS-CoV-2 Transmission among Mar | ine Recruits during Quara | ntine | |
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| 1. Given Name (First Name) | 2. Surname (Last Name) | 2 | . Date |
|--|---------------------------|---|-------------------|
| Ramiro | Gutierrez | | 20-September-2020 |
| 4. Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon | 2 |
| 5. Manuscript Title SARS-CoV-2 Transmission among Mar | ine Recruits during Quara | ntine | |
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| 1. Given Name (First Name) Aspasia | 2. Surname (Last Name) Kalomoiri | 3. Date 20-September-2020 |
|--|-------------------------------------|---|
| Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon |
| 5. Manuscript Title SARS-CoV-2 Transmission among Mar 5. Manuscript Identifying Number (if you | | ntine |

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.)?

🖌 No

| Are there any relevant conflicts of interest? Yes | Are there an | relevant conf | licts of interes | t? | Yes |
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|---|-----|--------------|----|
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| Section 1. | Identifying Infor | mation | |
|---------------------------------------|-------------------------|-----------------------------------|---|
| 1. Given Name (Fi Andrew | irst Name) | 2. Surname (Last Name) Letizia | 3. Date 20-September-2020 |
| 4. Are you the cor | rresponding author? | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon |
| 5. Manuscript Titl SARS-CoV-2 Trai | | rine Recruits during Quara | ntine |
| 6. Manuscript Ide 20-29717 | ntifying Number (if you | know it) | |

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🖌 No

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| 1. Given Name (First Name) Rhonda | 2. Surname (Last Name) Lizewski |) 3. Date 20-September-2020 |
|---|------------------------------------|---|
| 4. Are you the corresponding author? 5. Manuscript Title SARS-CoV-2 Transmission among Ma | Yes ✔ No | Corresponding Author's Name Stuart Sealfon antine |
| 6. Manuscript Identifying Number (if you 20-29717 | l know it) | |

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🖌 No

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| 1. Given Name (First Name) Stephen | 2. Surname (Last Name) Lizewski |) 3. Date 20-September-2020 |
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| 4. Are you the corresponding author? 5. Manuscript Title SARS-CoV-2 Transmission among M | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon antine |
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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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| Section 1. Identifying Infor | mation | | |
|--|-----------------------------------|--|------------------------------|
| 1. Given Name (First Name) Jan | 2. Surname (Last Name) Marayag | | 3. Date 20-September-2020 |
| 4. Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Nar Stuart Sealfon | ne |
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| 1. Given Name (First Name) Nada | 2. Surname (Last Name) Marjanovic | 3. Date 20-Septembe |
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| 4. Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon |
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|---|-----|
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| Are there any relevant conflicts of interest? | Yes | \checkmark | No |
|---|-----|--------------|----|
|---|-----|--------------|----|

| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? | Yes | 🖌 No | |
|--|-----|------|--|
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Section 5. Relationships not covered above

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Dr. Marjanovic has nothing to disclose.

Evaluation and Feedback



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| Section 1. | Identifying Infor | mation | | |
|---------------------------------------|-------------------------|----------------------------------|---|--|
| 1. Given Name (Fi Eugene | rst Name) | 2. Surname (Last Name) Millar | 3. Date 21-September-2020 | |
| 4. Are you the cor | responding author? | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon | |
| 5. Manuscript Titl SARS-CoV-2 Trai | | rine Recruits during Quara | ntine | |
| 6. Manuscript Ide 20-29717 | ntifying Number (if you | know it) | | |

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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.)?

🖌 No

| Are there any relevant conflicts of interest? | Yes | |
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| Section 1. | Identifying Infor | mation | |
|---------------------------------------|-------------------------|--------------------------------|---|
| 1. Given Name (Fi Venugopalan | irst Name) | 2. Surname (Last Name) Nair | 3. Date 20-September-2020 |
| 4. Are you the cor | rresponding author? | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon |
| 5. Manuscript Titl SARS-CoV-2 Trai | | rine Recruits during Quara | ntine |
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🖌 No

| Are there any relevant conflicts of interest? | Yes | |
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| 1. Given Name (First Name) | 2. Surname (Last Name) | | |
|---|----------------------------|-----------------------------|-----------|
| berman | Nudelman | 20-Septer | nber-2020 |
| 4. Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Name | |
| | | Stuart Sealfon | |
| 5. Manuscript Title SARS-CoV-2 Transmission among Ma | rine Recruits during Quara | ntine | |
| 6. Manuscript Identifying Number (if you 20-29717 | know it) | | |

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🖌 No

| Are there any relevant conflicts of interest? | Yes |
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| Section 1. Identifying Info | rmation | | |
|---|---------------------------------|---|-------------|
| 1. Given Name (First Name) Edgar | 2. Surname (Last Name) Nunez | | tember-2020 |
| 4. Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon | |
| 5. Manuscript Title SARS-CoV-2 Transmission among Ma | arine Recruits during Quara | ntine | |
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| Are there any relevant conflicts of interest? | Yes | |
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| 1. Given Name (Fi Ajay | rst Name) | 2. Surname (Last Name) Obla | 3. Date 21-September-2020 |
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| Section 1. | Identifying Infor | mation | | |
|--|-------------------------|--------------------------------|---|------------------------------|
| 1. Given Name (Fi Brian | rst Name) | 2. Surname (Last Name) Pike | | 3. Date 20-September-2020 |
| 4. Are you the cor | responding author? | Yes 🖌 No | Corresponding Author's Na Stuart Sealfon | me |
| 5. Manuscript Title SARS-CoV-2 Trar | | rine Recruits during Quara | ntine | |
| 6. Manuscript Ider 20-29717 | ntifying Number (if you | know it) | | |

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🖌 No

| Are there any relevant conflicts of interest? | | Yes |
|---|--|-----|
|---|--|-----|

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| Are there any relevant conflicts of interest? | | Yes | \checkmark | No |
|---|--|-----|--------------|----|
|---|--|-----|--------------|----|

| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? | Yes | V N | ١o |
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Dr. Pike has nothing to disclose.

Evaluation and Feedback



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| Section 1. | Identifying Infor | mation | | |
|--|-------------------------|----------------------------------|--|------------------------------|
| 1. Given Name (Fi Chad | rst Name) | 2. Surname (Last Name) Porter | | 3. Date 20-September-2020 |
| 4. Are you the cor | responding author? | Yes 🖌 No | Corresponding Author's Nar Stuart Sealfon | ne |
| 5. Manuscript Title SARS-CoV-2 Trar | | ine Recruits during Quara | ntine | |
| 6. Manuscript Ider 20-29717 | ntifying Number (if you | know it) | | |

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🖌 No

| Are there any relevant conflicts of interest? | Yes |
|---|-----|
|---|-----|

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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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| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date |
|--|----------------------------|-----------------------------|
| rene | Ramos | 21-September-202 |
| 4. Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Name |
| | | Stuart Sealfon |
| 5. Manuscript Title SARS-CoV-2 Transmission among Mai | rine Recruits during Quara | ntine |
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🖌 No

| Are there any relevant conflicts of interest? | Yes | |
|---|-----|--|
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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. Ramos has nothing to disclose.

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| 1. Given Name (First Name) James | 2. Surname (Last Name) Regeimbal | 3. Date 20-September-2 |
|--|-------------------------------------|---|
| 4. Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon |
| 5. Manuscript Title SARS-CoV-2 Transmission among Mar | ine Recruits during Quara | intine |
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| Are there any relevant conflicts of interest? | Yes |
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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. Regeimbal has nothing to disclose.

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| 1. Given Name (First Name) Stas | 2. Surname (Last Nam Rirak | ae) 3. Date 20-September-2020 |
| 4. Are you the correspondin | g author? 🛛 Yes 🖌 No | Corresponding Author's Name Stuart Sealfon |
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| 1. Given Name (First Name) Ernesto | 2. Surname (Last Name) Santa Ana | | . Date 0-September-2020 |
|---|-------------------------------------|---|----------------------------|
| 4. Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon | 2 |
| 5. Manuscript Title SARS-CoV-2 Transmission among Ma | rine Recruits during Quara | antine | |
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| Are there any relevant conflicts of interest? | | Yes | \checkmark | No |
|---|--|-----|--------------|----|
|---|--|-----|--------------|----|

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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Section 6. Disclosure Statement

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Mr. Santa Ana has nothing to disclose.

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| Section 1. Identifying Info | rmation | | |
|---|-----------------------------------|--|------------------------------|
| 1. Given Name (First Name) Rachel | 2. Surname (Last Name) Sealfon | | 3. Date 20-September-2020 |
| 4. Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Nan Stuart Sealfon | ne |
| 5. Manuscript Title SARS-CoV-2 Transmission among Ma | rine Recruits during Quara | ntine | |
| 6. Manuscript Identifying Number (if you 20-29717 | ı know it) | | |

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🖌 No

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|---|--|-----|--------------|----|

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| Section 1. | Identifying Infor | mation | |
|--|---------------------------|-----------------------------------|------------------------------|
| 1. Given Name (Fin Stuart | rst Name) | 2. Surname (Last Name) Sealfon | 3. Date 20-September-2020 |
| 4. Are you the corresponding author? | | ✓ Yes No | |
| 5. Manuscript Title SARS-CoV-2 Trar | | ine Recruits during Quarantine | |
| 6. Manuscript Ider 20-29717 | ntifying Number (if you l | know it) | |

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🖌 No

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| Section 1. | Identifying Infor | mation | |
|--|-------------------------|---------------------------------|---|
| 1. Given Name (Fi Robert | rst Name) | 2. Surname (Last Name) Sebra | 3. Date 20-September-2020 |
| 4. Are you the corresponding author? | | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon |
| 5. Manuscript Title SARS-CoV-2 Trar | | ine Recruits during Quara | antine |
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🖌 No

Are there any relevant conflicts of interest? Yes

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No

Are there any relevant conflicts of interest? Yes

If yes, please fill out the appropriate information below.

| Name of Entity | Grant? | Personal Fees ? | Non-Financial Support? | Other? | Comments | |
|------------------------------|--------|---------------------------|---------------------------|--------|---|--|
| Sema4, a Mount Sinai venture | | | | | Vice President of Technology Development at Sema4. Research conducted in this manuscript was not influenced or supported by Sema4, so this is just a statement for transparency of any perceived conflicts of interest. | |



Section 4. Intellectual Property -- Patents & Copyrights

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

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Dr. Sebra reports other from Sema4, a Mount Sinai venture, outside the submitted work.

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| Section 1. Identifying In | ormation | |
|--|----------------------------------|---|
| 1. Given Name (First Name) Mark | 2. Surname (Last Name) Simons | 3. Date 20-September-202 |
| 4. Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon |
| 5. Manuscript Title SARS-CoV-2 Transmission among I | Narine Recruits during Quara | ntine |
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🖌 No

| Are there any relevant conflicts of interest? | Yes |
|---|-----|
|---|-----|

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| 1. Given Name (First Name) Alessandra | 2. Surname (Last Name Soares Schanoski | | mber-2020 |
|---|---|---|-----------|
| 4. Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon | |
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| Are there any relevant conflicts of interest? | Y | 'es |
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| 1. Given Name (First Name) Victor Arief | 2. Surname (Last Name) Sugiharto | 3. Date 20-September-2 |
|--|-------------------------------------|---|
| Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon |
| Manuscript Title ARS-CoV-2 Transmission among Mai | ine Recruits during Quara | ntine |
| 5. Manuscript Identifying Number (if you 20-29717 | know it) | |

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🖌 No

| Are there any relevant conflicts of interest? | Yes |
|---|-----|
|---|-----|

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| Are there any relevant conflicts of interest? | Yes | \checkmark | No |
|---|-----|--------------|----|
|---|-----|--------------|----|

Section 4. Intellectual Property -- Patents & Copyrights

| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? | Υe | es 🗸 | No |
|--|----|------|----|
| | - | | - |



Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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Dr. Sugiharto has nothing to disclose.

Evaluation and Feedback



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| Section 1. Identifying Inf | ormation | |
|--|-----------------------------------|---|
| 1. Given Name (First Name) Michael | 2. Surname (Last Name) Termini | 3. Date 20-September-2020 |
| 4. Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon |
| 5. Manuscript Title SARS-CoV-2 Transmission among N | Narine Recruits during Quara | ntine |
| 6. Manuscript Identifying Number (if y 20-29717 | ou know it) | |

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🖌 No

| Are there any relevant conflicts of interest? | Yes | |
|---|-----|--|
|---|-----|--|

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| Are there any relevant conflicts of interest? | Yes | \checkmark | No |
|---|-----|--------------|----|
|---|-----|--------------|----|

Section 4. Intellectual Property -- Patents & Copyrights

| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? | | Yes | ✓ No |) |
|--|-----|-----|------|---|
| | 1 1 | | | |



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Dr. Termini has nothing to disclose.

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| Section 1. | Identifying Infor | mation | | | |
|---------------------------------------|-------------------------|---------------------------------------|---|--|--|
| 1. Given Name (Fi Olga | rst Name) | 2. Surname (Last Name) Troyanskaya | 3. Date 01-October-2020 | | |
| 4. Are you the corresponding author? | | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon | | |
| 5. Manuscript Titl SARS-CoV-2 Trai | | ine Recruits during Quarar | ntine | | |
| 6. Manuscript Ide 20-29717 | ntifying Number (if you | know it) | | | |

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🖌 No

Are there any relevant conflicts of interest? Yes

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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 | |
|-----------------------------|--------|-------------------|---------------------------|--------|------------|--|
| Caris Life Sciences | | \checkmark | | | SAB member | |
| Goldfinch Bio Computational | | \checkmark | | | SAB member | |

Section 4.

Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Ves



Section 5. Relationships not covered above

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Dr. Troyanskaya reports personal fees from Caris Life Sciences, personal fees from Goldfinch Bio Computational, outside the submitted work; .

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| Section 1. | Identifying Infor | mation | |
|--|-------------------------|-------------------------------------|---|
| 1. Given Name (Fi Harm | rst Name) | 2. Surname (Last Name) van Bakel | 3. Date 20-September-2020 |
| 4. Are you the corresponding author? | | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon |
| 5. Manuscript Title SARS-CoV-2 Trar | | ine Recruits during Quara | ntine |
| 6. Manuscript Ider 20-29717 | ntifying Number (if you | know it) | |

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Are there any relevant conflicts of interest? \checkmark Yes \square 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 | |
|--|--------------|-------------------|---------------------------|--------|----------|--|
| Defense Health Agency | \checkmark | | | | | |
| Naval Medical Research Center | \checkmark | | | | | |
| Defense Advanced Research Program Agency | \checkmark | | | | | |

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Are there any relevant conflicts of interest?

Yes 🖌 No

Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? 🗌 Yes

Section 4.

🖌 No



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Dr. van Bakel reports grants from Defense Health Agency, grants from Naval Medical Research Center, grants from Defense Advanced Research Program Agency, during the conduct of the study; .

Evaluation and Feedback



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| 1. Given Name (First Name) Adriana | 2. Surname (Last Name) van de Guchte | | 3. Date 20-September-2020 |
|---|---|--|------------------------------|
| 4. Are you the corresponding author? | Yes 🗸 No | Corresponding Author's Nam Stuart Sealfon | e |
| 5. Manuscript Title SARS-CoV-2 Transmission among Ma | rine Recruits during Quara | intine | |
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| Are there any relevant conflicts of interest? | Yes |
|---|-----|
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|---|--|-----|--------------|----|
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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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Ms. Van de Guchte has nothing to disclose.

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| Section 1. Identifying Info | rmation | | |
|---|-----------------------------------|--|------------------------------|
| 1. Given Name (First Name) Sindhu | 2. Surname (Last Name) Vangeti | | 3. Date 21-September-2020 |
| 4. Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Nam Stuart Sealfon | e |
| 5. Manuscript Title SARS-CoV-2 Transmission among Ma | arine Recruits during Quara | ntine | |
| 6. Manuscript Identifying Number (if you 20-29717 | ı know it) | | |

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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.)?

🖌 No

| Are there any relevant conflicts of interest? | Yes | |
|---|-----|--|
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| Are there any relevant conflicts of interest? | | Yes | \checkmark | No |
|---|--|-----|--------------|----|
|---|--|-----|--------------|----|

Section 4. Intellectual Property -- Patents & Copyrights

| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? | | Yes | 🖌 No | S |
|--|-----|-----|------|---|
| | 1 1 | | | - |



Section 5. Relationships not covered above

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Dr. Vangeti has nothing to disclose.

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3. Relevant financial activities outside the submitted work.

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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.

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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



| Section 1. | Identifying Infor | mation | |
|--|-------------------------|--------------------------------|---|
| 1. Given Name (Fi Dawn | irst Name) | 2. Surname (Last Name) Weir | 3. Date 20-September-2020 |
| 4. Are you the corresponding author? Yes | | Yes 🖌 No | Corresponding Author's Name Stuart Sealfon |
| 5. Manuscript Titl SARS-CoV-2 Trai | | rine Recruits during Quara | ntine |
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🖌 No

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| Section 1. Identifying Infor | mation | | |
|--|------------------------------------|--|------------------------------|
| 1. Given Name (First Name) Carlos | 2. Surname (Last Name) Williams | | 3. Date 20-September-2020 |
| 4. Are you the corresponding author? | Yes 🖌 No | Corresponding Author's Nar Stuart Sealfon | ne |
| 5. Manuscript Title SARS-CoV-2 Transmission among Mar | ine Recruits during Quara | ntine | |
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