

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.

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4. Intellectual Property.

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

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Michael

2. Surname (Last Name)

Nicolaro

3. Date

22-June-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Eric A. Singer

5. Manuscript Title

The Human Microbiome and Genitourinary Malignancies

6. Manuscript Identifying Number (if you know it)

ATM-20-2976

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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☒ No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Daniella	2. Surname (Last Name) Portal	3. Date 22-June-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Eric A. Singer
5. Manuscript Title The Human Microbiome and Genitourinary Malignancies		
6. Manuscript Identifying Number (if you know it) ATM-20-2976		

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Section 4. Intellectual Property -- Patents & Copyrights

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1. Given Name (First Name) Brian	2. Surname (Last Name) Shinder	3. Date 22-June-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Eric A. Singer
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Hiren	2. Surname (Last Name) Patel	3. Date 18-May-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Eric A. Singer
5. Manuscript Title Taking a SPOP at Renal Cell Carcinoma – Unraveling a Novel Pathway for Tumor Progression in Clear Cell RCC		
6. Manuscript Identifying Number (if you know it) 		

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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
National Cancer Institute	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Institutional grant, P30CA072720

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Dr. Patel reports grants from National Cancer Institute, during the conduct of the study; .

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Section 1. Identifying Information

1. Given Name (First Name)

Eric

2. Surname (Last Name)

Singer

3. Date

18-June-2020

4. Are you the corresponding author?

☒ Yes ☐ No

5. Manuscript Title

The Human Microbiome and Genitourinary Malignancies

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If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Astellas/Medivation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Research support to institution.

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Dr. Singer reports grants from Astellas/Medivation, outside the submitted work; .

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