

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.

Identifying information.

2. The work under consideration for publication.

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3. Relevant financial activities outside the submitted work.

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4. Intellectual Property.

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

Relationships not covered above.

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Royalties: Funds are coming in to you or your institution due to your patent

Cruz Rodriguez 1



| Section 1. Identifying Inform | nation | |
|--|--|----------------------------------|
| 1. Given Name (First Name) Jose Benjamin | Surname (Last Name) Cruz Rodriguez | 3. Date 16-June-2020 |
| 4. Are you the corresponding author? | ✓ Yes No | |
| 5. Manuscript Title Current role of angiotensin receptor-ne | eprilysin inhibitors | |
| 6. Manuscript Identifying Number (if you ki ATM-20-4038 | now it) | |
| | | |
| Section 2. The Work Under C | onsideration for Publication | |
| any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of inter | eive payment or services from a third party (government, c g but not limited to grants, data monitoring board, study o est? Yes V No | |
| Section 3. Relevant financial | activities outside the submitted work. | |
| of compensation) with entities as descr | in the table to indicate whether you have financial relibed in the instructions. Use one line for each entity; port relationships that were present during the 36 est? Yes No | add as many lines as you need by |
| Section 4. Intellectual Proper | rty Patents & Copyrights | |
| Do you have any patents, whether plan | ned, pending or issued, broadly relevant to the wor | k? Yes 🗸 No |

Cruz Rodriguez 2



| Section 5. Polotionships not sovered above | | | | |
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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. Cruz Rodriguez has nothing to disclose. | | | | |

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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Cu 1



| Section 1. Identifying Inforn | nation | | | |
|---|------------------------------|---|--|--|
| Given Name (First Name) Cameron | 2. Surname (Last Name) Cu | 3. Date 17-June-2020 | | |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Jose B. Cruz Rodriguez | | |
| 5. Manuscript Title Current role of angiotensin receptor-ne | eprilysin inhibitors | | | |
| 6. Manuscript Identifying Number (if you ki ATM-20-4038 | now it) | | | |
| Section 2. The World Harden C | | | | |
| The Work Under C | onsideration for Publi | cation | | |
| 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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| Do you have any patents, whether plan | | | | |

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Siddiqui 1



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|---|-----------------------------|------------------------------------|---|--|
| 1. Given Name (Fi | rst Name) | 2. Surname (Last Name) Siddiqui | 3. Date 17-June-2020 | |
| 4. Are you the cor | responding author? | ☐ Yes ✓ No | Corresponding Author's Name Jose B. Cruz Rodriguez | |
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| Do you have any | | | broadly relevant to the work? Yes V No | |

Siddiqui 2



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