

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

Miglierini 1



Section 1.	ldentifying Inform	ation			
1. Given Name (Fi Petra	rst Name)	2. Surnam Miglierini	e (Last Name)		3. Date 27-February-2014
4. Are you the cor	responding author?	✓ Yes	No		
5. Manuscript Title Brest experience	e in intraoperative radio	therapy for	breast cancer		
6. Manuscript Idei	ntifying Number (if you kn	ow it)			
Section 2.	The Work Under Co	onsiderati	on for Publication		
any aspect of the s statistical analysis,	ubmitted work (including	but not limi	or services from a third party (g ted to grants, data monitoring l es		emmercial, private foundation, etc.) for esign, manuscript preparation,
Section 3.					
Section 5.	Relevant financial	activities	outside the submitted w	vork.	
of compensation clicking the "Ado) with entities as descri	bed in the i oort relatior	nstructions. Use one line for	each entity; a	lationships (regardless of amount add as many lines as you need by nonths prior to publication.
Section 4.	Intellectual Proper	ty Pateı	nts & Copyrights		
Do you have any	patents, whether plans	ned, pendir	ng or issued, broadly relevan	nt to the work?	? ☐ Yes ✓ No

Miglierini 2



Section 5.				
Section 5.	Relationships not covered above			
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?			
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Dr. Miglierini ha	s nothing to disclose.			

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Miglierini 3



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Key 1



Section 1.	Identifying Inform	nation			
1. Given Name (First Name) Stéphane		2. Surname (Last Name) Key	3. Date 27-February-2014		
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Petra Miglierini		
5. Manuscript Title Brest experience		otherapy for breast cancer			
6. Manuscript Ider	ntifying Number (if you kr	now it)			
Section 2.	The Work Under Co	onsideration for Public	ation		
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					
rue anere any ren	we there any relevant comments of interest.				
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of compensation clicking the "Add	the appropriate boxes i ı) with entities as descri	in the table to indicate who ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e present during the 36 months prior to publication.		
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		rty Patents & Copyrig			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes You					

Key 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
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✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
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Dr. Key has noth	ing to disclose.

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Key 3



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Dupré 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Pierre-François	rst Name)	2. Surname (Last Name) Dupré	3. Date 27-February-2014
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Petra Miglierini
5. Manuscript Title Brest experience		otherapy for breast cancer	
6. Manuscript Ide	ntifying Number (if you kr	now it)	
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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Dupré 2



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Le Fur 1



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4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Petra Miglierini
5. Manuscript Title Brest experience		therapy for breast cancer	
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Le Fur 2



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Lucia 1



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4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Petra Miglierini
5. Manuscript Title Brest experience in intraoperative radio	therapy for breast cancer	
6. Manuscript Identifying Number (if you kn	now it)	
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Section 2. The Work Under Co	onsideration for Public	cation
	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	submitted work.
of compensation) with entities as descri	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4. Intellectual Proper		l.c.
Intellectual Proper	rty Patents & Copyrig	ints ———
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Lucia 2



Section 5. Relationships not covered above
Relationships not covered above
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Dr. Lucia has nothing to disclose.

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

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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

Quillevere 1



Section 1.	Identifying Inform	nation				
1. Given Name (First Name) Sarah		Surname (Last Name) Quillevere	3. Date 27-February-2014			
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Petra Miglierini			
5. Manuscript Title Brest experience in intraoperative radiotherapy for breast cancer						
6. Manuscript Identifying Number (if you know it)						
			-			
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Section 4.	Intellectual Proper	rty Patents & Copyri <u>c</u>	phts			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo						

Quillevere 2



Section 5. Polationships not sovered above				
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Royalties: Funds are coming in to you or your institution due to your

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Section 1.	Identifying Inform	nation				
1. Given Name (First Name) Olivier		2. Surname (Last Name) Pradier	3. Date 27-February-2014			
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Petra Miglierini			
5. Manuscript Title Brest experience		otherapy for breast cancer				
6. Manuscript Identifying Number (if you know it)						
			-			
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