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APPENDIX A

FINANCIAL INTEREST DISCLOSURE FORM (PROTOCOL SPECIFIC)

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If Other, Ple	ease Specify	
Department	t:	
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!S	No	
-		Was involved in the development of a product that directly competes with the Test Article.
_		Hold any equity interest in the manufacturer of a product that directly competes with the Test Article.
_		Have an uncompensated relationship with the manufacturer of a product that directly competes with the Test Article, for example sitting on a scientific advisory board or a board of directors without pay.
_		Have any other relationship to the inventor and/or manufacturer of a product that directly competes with the Test Article.
		Have other relationships which may create any conflict of interest.
otik	onal pap	per, as necessary, to provide a complete response:
	III. (includi	For any PHS funded research, please provide the following information for all travel ng any scheduled travel within the next twelve (12) months):
	W	/ho paid for or sponsored your travel:
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Please use additional paper, if necessary.

I understand that I must update this disclosure during the period of the study, either on an annual basis or as new reportable significant financial interests are obtained.

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Medical Center/ Department:	

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