

## 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.

#### 1. Identifying information.

#### 2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party – that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

#### 3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

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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#### 4. Intellectual Property.

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

#### 5. Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

#### Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

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**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

**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

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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) CRISTINA	2. Surname (Last Name) BARBARA	3. Date 06-November-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jean Bousquet
5. Manuscript Title AIRWAYS ICPs (European Innovation Partnership on Active and Healthy Ageing) from concept to implementation		
6. Manuscript Identifying Number (if 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.)?

Are there any relevant conflicts of interest?  Yes  No

### Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest?  Yes  No

### 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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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Eric D.

2. Surname (Last Name)  
Bateman

3. Date  
24-September-2015

4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Huib A.M. Kerstjens, PhD

5. Manuscript Title  
Tiotropium improves lung function, exacerbation rate, and asthma control, independent of baseline characteristics

6. Manuscript Identifying Number (if 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.)?

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
Boehringer Ingelheim	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Medical writing support for the development of this manuscript was funded by the study sponsor. Advisory board membership, lecture fees. Institution received grants for clinical trials

### Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest?  Yes  No

If yes, please fill out the appropriate information below.

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Astra Zeneca	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consulting, advisory board membership (asthma & COPD); payment for lectures including service on speakers bureaus; grants to institution for multicentre clinical trials
Novartis	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advisory board membership (COPD drug development); payment for lectures including service on speakers bureaus; grants to institution for multicentre clinical trials
Almirall	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advisory board membership (COPD drug development); fees for consultancy; grants to institution for multicentre clinical trials
Merck	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grants to institution for multicentre clinical trials
Takeda	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advisory board membership (COPD & asthma studies); payment for lectures including service on speakers bureaus, grants to institution for multicentre clinical trial
GSK	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advisory board membership (asthma trial design); payment for lectures including service on speakers bureaus; grants to institution for multicentre clinical trial
Hoffmann la Roche	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grants to institution for multicentre clinical trial
ICON	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fees for consultancy; Study Oversight Steering Committee
Actelion	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grants to institution for multicentre clinical trial
Aeras	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grants to institution for vaccine trial
Chiesi	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Payment for lectures including service on speakers bureaus; grants to institution for multicentre clinical trial
Teva	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grant to institution for multicentre clinical trial
Sanofi-Aventis	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grant to institution for multicentre clinical trial
PeerVoice	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Educational materials

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Cephalon	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grant to institution for multicentre clinical trial
Cipla	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advisory board membership; lecture fees
Menarini	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	lecture fee

### 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

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

- Yes, the following relationships/conditions/circumstances are present (explain below):  
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Membership of the Board of the Global Initiative for Asthma (GINA)

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### Section 6. Disclosure Statement

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Dr. Bateman reports a grant to his institution, and fees for consulting, advisory board membership and lectures sponsored by Boehringer Ingelheim; He reports personal fees for consulting and advisory board membership from AstraZeneca; personal fees for advisory board membership from Almirall, Cipla, Glaxo SmithKline, Novartis, Takeda, and ICON ; personal fees for lectures from AstraZeneca, Chiesi, Cipla, Glaxo SmithKline, Novartis and Takeda; personal fees for educational materials from PeerVoice; and grants to his institution for participation in clinical trials sponsored by Actelion, Aeras, Almirall, AstraZeneca, Boehringer Ingelheim, Cephalon, Chiesi, Glaxo SmithKline, Hoffman la Roche, Merck, Novartis, Takeda, Teva and Sanofi-Aventis outside the submitted work

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Elisabeth	2. Surname (Last Name) Bel	3. Date 31-October-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jean Bousquet
5. Manuscript Title AIRWAYS ICPs (European Innovation Partnership on Active and Healthy ageing) from concept to implementation		
6. Manuscript Identifying Number (if 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.)?

Are there any relevant conflicts of interest?  Yes  No

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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
Chiesi	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
GSK	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
AstraZeneca	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cipla	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Novartis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sanofi/regeneron	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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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

### Section 5. Relationships not covered above

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Dr. Bel reports grants from Chiesi, GSK, AstraZeneca, and personal fees from GSK, AstraZeneca, Cipla, Novartis, Sanofi/regeneron, outside the submitted work.

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### Section 1. Identifying Information

1. Given Name (First Name)

Mike

2. Surname (Last Name)

BEWICK

3. Date

06-November-2015

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Jean Bousquet

5. Manuscript Title

AIRWAYS ICPs (European Innovation Partnership on Active and Healthy Ageing) from concept to implementation

6. Manuscript Identifying Number (if you know it)

///

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Enter your full name. If you are NOT the corresponding author please check the box "no" and a space to enter the name of the corresponding author in the space that appears. Provide the requested manuscript information. Double-check the manuscript number and enter it.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Jean
2. Surname (Last Name)  
Bousquet
3. Effective Date (07-August-2008)  
04-November-2015
4. Are you the corresponding author?  Yes  No
5. Manuscript Title  
AIRWAYS ICPs (European Innovation Partnership on Active and Healthy Ageing) from concept to implementation
6. Manuscript Identifying Number (if 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 for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

Complete each row by checking "No" or providing the requested information. **If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.**

#### The Work Under Consideration for Publication

Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
2. Consulting fee or honorarium	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Actelion, Almirall, Meda, Merck, Merck Sharp Dohme, Novartis, Sanofi-Aventis, Takeda, Teva, and Uriach		X
						ADD
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Almirall, AstraZeneca, Chiesi, GlaxoSmithKline, Meda, Merck, Merck Sharp Dohme, Novartis, OM Pharma, Sanofi-Aventis, Schering-Plough, Takeda, Teva, and Uriach		X
						ADD

\* This means money that your institution received for your efforts on this study.

\*\* Use this section to provide any needed explanation.



## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 3.

#### Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

Complete each row by checking "No" or providing the requested information. **If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.**

Relevant financial activities outside the submitted work						
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Actelion, Almirall, Meda, Merck, Merck Sharp Dohme, Novartis, Sanofi-Aventis, Takeda, Teva, and Uriach		X
<b>ADD</b>						
6. Payment for lectures including service on speakers bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Almirall, AstraZeneca, Chiesi, GlaxoSmithKline, Meda, Merck, Merck Sharp Dohme, Novartis, OM Pharma, Sanofi-Aventis, Schering-Plough, Takeda, Teva, and Uriach		X
<b>ADD</b>						
10. Payment for development of educational presentations	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Almirall, AstraZeneca, Chiesi, GlaxoSmithKline, Meda, Merck, Merck Sharp Dohme, Novartis, OM Pharma, Sanofi-Aventis, Schering-Plough, Takeda, Teva. and Uriach		X
<b>ADD</b>						

\* This means money that your institution received for your efforts.

\*\* For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 4.

#### Other relationships

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

- No other relationships/conditions/circumstances that present a potential conflict of interest  
 Yes, the following relationships/conditions/circumstances are present (explain below):

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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) Niels	2. Surname (Last Name) CHAVANNES	3. Date 06-November-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jean Bousquet
5. Manuscript Title AIRWAYS ICPs (European Innovation Partnership on Active and Healthy Ageing) from concept to implementation		
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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) ALVARO	2. Surname (Last Name) CRUZ	3. Date 06-November-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jean Bousquet
5. Manuscript Title AIRWAYS ICPs (European Innovation Partnership on Active and Healthy Ageing) from concept to implementation		
6. Manuscript Identifying Number (if you know it) ///		

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Are there any relevant conflicts of interest?  Yes  No

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Are there any relevant conflicts of interest?  Yes  No

### Section 4. Intellectual Property -- Patents & Copyrights

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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Tari	2. Surname (Last Name) HAATELA	3. Date 06-November-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jean Bousquet
5. Manuscript Title AIRWAYS ICPs (European Innovation Partnership on Active and Healthy Ageing) from concept to implementation		
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Are there any relevant conflicts of interest?  Yes  No

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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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Karin C. Lødrup	2. Surname (Last Name) Carlsen	3. Date 01-November-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jean Bousquet
5. Manuscript Title AIRWAYS ICPs (European Innovation Partnership on Active and Healthy Ageing) from concept to implementation		
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Are there any relevant conflicts of interest?  Yes  No

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Attended a scientific advisory board meeting for Sanofi in 2015. Received grants from major national public bodies for research, and funding from the EU in relation to the MeDALL project.

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Professor Carlsen has declared no Col related to the present paper, but has recieved research funding from åublic national and EU sources and attended scientific advisory board (non-funded) of Sanofi.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Antonella	2. Surname (Last Name) MURARO	3. Date 06-November-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jean Bousquet
5. Manuscript Title AIRWAYS ICPs (European Innovation Partnership on Active and Healthy Ageing) from concept to implementation		
6. Manuscript Identifying Number (if you know it) ///		

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Carlos

2. Surname (Last Name)

ROBALO-CORDEIRO

3. Date

06-November-2015

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Jean Bousquet

5. Manuscript Title

AIRWAYS ICPs (European Innovation Partnership on Active and Healthy Ageing) from concept to implementation

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name) Jose	2. Surname (Last Name) ROSADO-PINTO	3. Date 06-November-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jean Bousquet
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1. Given Name (First Name) Boleslaw	2. Surname (Last Name) SAMOLINSKI	3. Date 06-November-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jean Bousquet
5. Manuscript Title AIRWAYS ICPs (European Innovation Partnership on Active and Healthy Ageing) from concept to implementation		
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1. Given Name (First Name) Timo	2. Surname (Last Name) STRANDBERG	3. Date 06-November-2015
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Are there any relevant conflicts of interest?  Yes  No

### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  Yes  No

### 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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#### 1. Identifying information.

#### 2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party – that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

#### 3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

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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.

#### 4. Intellectual Property.

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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

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

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1. Given Name (First Name)

Arzu

2. Surname (Last Name)

YORGANCIOGLU

3. Date

06-November-2015

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Jean Bousquet

5. Manuscript Title

AIRWAYS ICPs (European Innovation Partnership on Active and Healthy Ageing) from concept to implementation

6. Manuscript Identifying Number (if you know it)

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### Section 1. Identifying Information

1. Given Name (First Name) Torsten	2. Surname (Last Name) ZUBERBIER	3. Date 06-November-2015
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jean Bousquet
5. Manuscript Title AIRWAYS ICPs (European Innovation Partnership on Active and Healthy Ageing) from concept to implementation		
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.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Ansell, Bayer Schering, DST, FAES, Fujisawa, HAL, Henkel, Kryolan, Leti, Menarini, Merck, MSD, Novartis, Procter and Gamble, Ranbaxy, Sanofi-Aventis, Schering Plough, Stallergenes, Takeda, UCB	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Industry consulting, research grants and/or honoraria

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Scientific Advisory Board, German Society for Allergy and Clinical Immunology (DGAKI) Head, European Centre for Allergy Research Foundation (ECARF) Committee member, WHO-Initiative Allergic Rhinitis and its Impact on Asthma (ARIA) Member, World Allergy Organisation Communications Council (WAO) Secretary General, Global Allergy and Asthma European Network (GA <sup>2</sup> LEN)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Organizational Affiliations

### 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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