

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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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)

Xiang

2. Surname (Last Name)

Gao

3. Date

06-September-2020

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Implications for gambling prevention strategies in firefighters

6. Manuscript Identifying Number (if you know it)

JPHE-20-61

### 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.)?

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Dr. Gao has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Nathan	2. Surname (Last Name) Deming	3. Date 13-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiang Gao
5. Manuscript Title Implications for gambling prevention strategies in firefighters		
6. Manuscript Identifying Number (if you know it) JPHE-20-61		

### 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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Dr. Deming has nothing to disclose.

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1. Given Name (First Name) Kristen	2. Surname (Last Name) Moore	3. Date 13-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiang Gao
5. Manuscript Title Implications for gambling prevention strategies in firefighters		
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1. Given Name (First Name) Alyssa	2. Surname (Last Name) Cavalier	3. Date 13-September-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiang Gao
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