ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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### Section 1. Identifying Information

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>Maja Dahl</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Surname (Last Name)</td>
<td>Langhoff</td>
</tr>
<tr>
<td>3. Date</td>
<td>28-March-2014</td>
</tr>
<tr>
<td>4. Are you the corresponding author?</td>
<td>[ ] Yes [ ] No</td>
</tr>
<tr>
<td>5. Manuscript Title</td>
<td>Domestic exposure to asbestos in women with malignant mesothelioma of the pleura</td>
</tr>
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</tr>
</tbody>
</table>

### Section 2. The Work Under Consideration for Publication

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Dr. Langhoff has nothing to disclose.

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Brøndberg Kragh-Thomsen 1
## Section 1. Identifying Information

1. **Given Name (First Name)**
   Maren

2. **Surname (Last Name)**
   Brøndberg Kragh-Thomsen

3. **Date**
   28-March-2014

4. **Are you the corresponding author?**
   - [ ] Yes
   - [✓] No
   **Corresponding Author’s Name**
   Maja Dahl Langhoff

5. **Manuscript Title**
   Domestic exposure to asbestos in women with malignant mesothelioma of the pleura

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1. **Given Name (First Name)**
   - Sharleny

2. **Surname (Last Name)**
   - Stanislaus

3. **Date**
   - 28-March-2014

4. **Are you the corresponding author?**
   - [ ] Yes  ✔ No

   **Corresponding Author’s Name**
   - Maja Dahl Langhoff

5. **Manuscript Title**
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1. **Given Name (First Name)**
   - Ulla

2. **Surname (Last Name)**
   - Møller Weinreich

3. **Date**
   - 28-March-2014

4. **Are you the corresponding author?**
   - Yes

5. **Manuscript Title**
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