

ICMJE DISCLOSURE FORM

Date: 7/14/2023

Your Name: Matthew Zammit

Manuscript Title: Characterizing the emergence of amyloid and tau burden in Down syndrome

Manuscript Number (if known): ADJ-D-23-00575R1

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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Date: 7/14/2023

Your Name: Tobey Betthauser

Manuscript Title: Characterizing the emergence of amyloid and tau burden in Down syndrome

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Date: 7/14/2023

Your Name: Andrew McVea

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Date: 7/14/2023

Your Name: Charles Laymon

Manuscript Title: Characterizing the emergence of amyloid and tau burden in Down syndrome

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ICMJE DISCLOSURE FORM

Date: 7/14/2023

Your Name: Dana Tudorascu

Manuscript Title: Characterizing the emergence of amyloid and tau burden in Down syndrome

Manuscript Number (if known): ADJ-D-23-00575R1

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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ICMJE DISCLOSURE FORM

Date: 7/14/2023

Your Name: Sterling Johnson

Manuscript Title: Characterizing the emergence of amyloid and tau burden in Down syndrome

Manuscript Number (if known): ADJ-D-23-00575R1

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ICMJE DISCLOSURE FORM

Date: 7/14/2023

Your Name: Sigan Hartley

Manuscript Title: Characterizing the emergence of amyloid and tau burden in Down syndrome

Manuscript Number (if known): ADJ-D-23-00575R1

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ICMJE DISCLOSURE FORM

Date: 7/14/2023

Your Name: Alexander Converse

Manuscript Title: Characterizing the emergence of amyloid and tau burden in Down syndrome

Manuscript Number (if known): ADJ-D-23-00575R1

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ICMJE DISCLOSURE FORM

Date: 7/14/2023

Your Name: Davneet Minhas

Manuscript Title: Characterizing the emergence of amyloid and tau burden in Down syndrome

Manuscript Number (if known): ADJ-D-23-00575R1

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ICMJE DISCLOSURE FORM

Date: 7/14/2023

Your Name: Shahid Zaman

Manuscript Title: Characterizing the emergence of amyloid and tau burden in Down syndrome

Manuscript Number (if known): ADJ-D-23-00575R1

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Date: 7/14/2023

Your Name: Beau Ances

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ICMJE DISCLOSURE FORM

Date: 7/14/2023

Your Name: Charles Stone

Manuscript Title: Characterizing the emergence of amyloid and tau burden in Down syndrome

Manuscript Number (if known): ADJ-D-23-00575R1

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ICMJE DISCLOSURE FORM

Date: 7/14/2023

Your Name: Chester Mathis

Manuscript Title: Characterizing the emergence of amyloid and tau burden in Down syndrome

Manuscript Number (if known): ADJ-D-23-00575R1

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ICMJE DISCLOSURE FORM

Date: 7/14/2023

Your Name: Annie Cohen

Manuscript Title: Characterizing the emergence of amyloid and tau burden in Down syndrome

Manuscript Number (if known): ADJ-D-23-00575R1

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ICMJE DISCLOSURE FORM

Date: 7/14/2023

Your Name: William Klunk

Manuscript Title: Characterizing the emergence of amyloid and tau burden in Down syndrome

Manuscript Number (if known): ADJ-D-23-00575R1

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input type="checkbox"/> None	
		GE Healthcare	Financial interest as co-inventor of PiB
<p>Please place an "X" next to the following statement to indicate your agreement:</p> <p><input checked="" type="checkbox"/> I certify that I have answered every question and have not altered the wording of any of the questions on this form.</p>			

ICMJE DISCLOSURE FORM

Date: 7/14/2023

Your Name: Benjamin Handen

Manuscript Title: Characterizing the emergence of amyloid and tau burden in Down syndrome

Manuscript Number (if known): ADJ-D-23-00575R1

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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Date: 7/14/2023

Your Name: Bradley Christian

Manuscript Title: Characterizing the emergence of amyloid and tau burden in Down syndrome

Manuscript Number (if known): ADJ-D-23-00575R1

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