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.

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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)  
   Melissa

2. Surname (Last Name)  
   Bond

3. Date  
   08-April-2020

4. Are you the corresponding author?  
   ✔ Yes  
   ☐ No

   Corresponding Author's Name  
   Ricardo Muñoz

5. Manuscript Title  
   Development and Usability of a Spanish/English Smoking Cessation Website: Lessons Learned

6. Manuscript Identifying Number (if you know it)  
   mHealth-19-255

**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.

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<tr>
<td>This research was supported by funds from the California Tobacco-Related Disease Research Grants Program Office of the University of California (PI: Muñoz), grant number 24RT-0027. This research was supported in part by a Google Ads grant.</td>
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   ✔ No
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Section 4. Intellectual Property -- Patents & Copyrights
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Section 6. Disclosure Statement
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Dr. Bond reports grants from This research was supported by funds from the California Tobacco-Related Disease Research Grants Program Office of the University of California (PI: Muñoz), grant number 24RT-0027. This research was supported in part by a Google Ads grant., during the conduct of the study;.

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) 
   Eduardo

2. Surname (Last Name) 
   Bunge

3. Date 
   23-March-2020

4. Are you the corresponding author? 
   Yes ☐ No ☑

Corresponding Author’s Name 
   Ricardo Muñoz

5. Manuscript Title 
   Development and Usability of a Spanish/English Smoking Cessation Website: Lessons Learned

6. Manuscript Identifying Number (if you know it)

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Dr. Bunge has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Yan
2. Surname (Last Name) Leykin
3. Date 23-March-2020
4. Are you the corresponding author? [ ] Yes [✓] No
   Corresponding Author’s Name Ricardo Muñoz
5. Manuscript Title
   Development and Usability of a Spanish/English Smoking Cessation Website: Lessons Learned
6. Manuscript Identifying Number (if you know it)
   mHealth-19-255

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Dr. Leykin has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Alinne

2. Surname (Last Name)  
   Barrera

3. Date  
   23-March-2020

4. Are you the corresponding author?  
   [ ] Yes  [✓] No  
   Corresponding Author’s Name  
   Ricardo Muñoz

5. Manuscript Title  
   Development and Usability of a Spanish/English Smoking Cessation Website: Lessons Learned

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Dr. Barrera has nothing to disclose.

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. Given Name (First Name)  
   Robert

2. Surname (Last Name)  
   Wickham

3. Date  
   28-March-2020

4. Are you the corresponding author?  
   ☑ No  
   Corresponding Author’s Name  
   Ricardo Muñoz

5. Manuscript Title  
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Dr. Wickham has nothing to disclose.

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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)  
M. Rose

2. Surname (Last Name)  
Barlow

3. Date  
23-March-2020

4. Are you the corresponding author?  
☐ Yes  ☑ No

Corresponding Author’s Name  
Ricardo Muñoz

5. Manuscript Title  
Development and Usability of a Spanish/English Smoking Cessation Website: Lessons Learned

6. Manuscript Identifying Number (if you know it)  
mHealth-19-255

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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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Dr. Barlow has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
Sara

2. Surname (Last Name)  
Reyes

3. Date  
25-March-2020

4. Are you the corresponding author?  
☑ Yes  ☐ No  
Corresponding Author’s Name  
Ricardo Muñoz

5. Manuscript Title  
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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.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Blanca

2. Surname (Last Name)  
   Pineda

3. Date  
   08-April-2020

4. Are you the corresponding author?  
   Yes  ☑ No

Corresponding Author's Name  
Ricardo Muñoz

5. Manuscript Title  
Development and Usability of a Spanish/English Smoking Cessation Website: Lessons Learned

6. Manuscript Identifying Number (if you know it)  
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Yes  ☑ No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Angelica

2. Surname (Last Name)  
   Ceja

3. Date  
   06-April-2020

4. Are you the corresponding author?  
   ✔ Yes  
   No

Corresponding Author’s Name  
Ricardo Muñoz

5. Manuscript Title  
Development and Usability of a Spanish/English Smoking Cessation Website: Lessons Learned

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mHealth-19-255

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Cano
Section 1. Identifying Information

1. Given Name (First Name)  
Monique

2. Surname (Last Name)  
Cano

3. Date  
17-April-2020

4. Are you the corresponding author?  
☐ Yes  ✔ No  
Corresponding Author's Name  
Ricardo Muñoz

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Dr. Cano has nothing to disclose.

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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.**

   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.
- **Grant:** A grant from an entity, generally (but not always) paid to your organization
- **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
- **Issued:** The patent has been issued by the agency
- **Licensed:** The patent has been licensed to an entity, whether earning royalties or not
- **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)  
Ricardo

2. Surname (Last Name)  
Muñoz

3. Date  
25-March-2020

4. Are you the corresponding author?  
✔ Yes  
No

5. Manuscript Title  
Development and Usability of a Spanish/English Smoking Cessation Website: Lessons Learned

6. Manuscript Identifying Number (if you know it)  
mHealth-19-255

## 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.

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<thead>
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<tr>
<td>This research was supported by funds from the California Tobacco-Related Disease Research Grants Program Office of the University of California (PI: Muñoz), grant number 24RT-0027. This research was supported in part by a Google Ads grant.</td>
<td>✔</td>
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</tbody>
</table>

## 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?  
No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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):

✔ No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Muñoz reports grants from the California Tobacco-Related Disease Research Grants Program Office of the University of California (PI: Muñoz), grant number 24RT-0027. This research was also supported in part by a Google Ads grant, during the conduct of the study.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.