

## ICMJE DISCLOSURE FORM

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**Your Name:** Joost G Lange

**Manuscript Title:** Zeldzame oorzaken van een veelvoorkomend probleem: hirsutisme

**Manuscript Number (if known):** D8354

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<b>Time frame: Since the initial planning of the work</b>									
<b>1</b>	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	X <b>None</b>							
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<b>2</b>	Grants or contracts from any entity (if not indicated in item #1 above).	X <b>None</b>							
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<b>3</b>	Royalties or licenses	X <b>None</b>							
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<b>4</b>	Consulting fees	X <b>None</b>							
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X None	

