Date:		;	7/30/2022		
Your Name:			Tracy Long-Sutehall		
Manuscript Title:			EDIPPPP -Eye Donation from Palliative and Hospice care contexts: investigating Potential, Practice, Preference and Perceptions: multicentre, mixed methods study.		
Ma	nuscript Number (if k	nown):	Not known		
In the interest of transparency, we content of your manuscript. "Rela affected by the content of the ma indicate a bias. If you are in doub The author's relationships/activiti		ipt. "Rela of the man e in doubt os/activition, you	e ask you to disclose all relationships/activities/interests listed below that are related to the ated" means any relation with for-profit or not-for-profit third parties whose interests may be nuscript. Disclosure represents a commitment to transparency and does not necessarily t about whether to list a relationship/activity/interest, it is preferable that you do so.  es/interests should be defined broadly. For example, if your manuscript pertains to the u should declare all relationships with manufacturers of antihypertensive medication, even if in the manuscript.		
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6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	[⊠] None	

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Date:			11/07/2022		
Your Name:			Michael Bracher		
Manuscript Title:			EDIPPPP -Eye Donation from Palliative and Hospice care contexts: investigating Potential, Practice, Preference and Perceptions: multicentre, mixed methods study.		
Mar	uscript Number (if k	nown):	Not Known		
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Date:	6/14/2022
Your Name:	Sarah Mollart
Manuscript Title:	EDIPPPP -Eye Donation from Palliative and Hospice care contexts: investigating Potential, Practice, Preference and Perceptions: multicentre, mixed methods study
Manuscript Number (if known):	Click or tap here to enter text.

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6	Payment for expert testimony	□ None	
7	Support for attending meetings and/or travel	None	
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-financial interests	None	
Plea	•	t to the following statement to indicate your agreeme answered every question and have not altered the wo	

Date:		7/21/2022	7/21/2022		
Your Name:		Jane Wale	Jane Wale		
Manuscript Title:		-	EDIPPPP -Eye Donation from Palliative and Hospice care contexts: investigating Potential, Practice, Preference and Perceptions: multicentre, mixed methods study		
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