

#### 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.

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Section 1.	Identifying Info	mation	
1. Given Name (Fi Bennet	rst Name)	2. Surname (Last Name) Butler	3. Date 21-August-2017
4. Are you the cor	responding author?	✓ Yes No	
5. Manuscript Title Valgus osteotom		fixation for the treatment of proximal fe	moral deformities due to fibrous dysplasia

## 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.)?

🖌 No

Are there any relevant conflicts of interest?	Yes
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# Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?	Yes	$\checkmark$	No
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?	<b>Γ</b>	/es	✓ No	
	1 1			



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Dr. Butler has nothing to disclose.

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1. Given Name (F Ryan	irst Name)	2. Surname (Last Name Harold	)	3. Date 21-August-2017
4. Are you the co	rresponding author?	Yes 🖌 No	Corresponding Author's Nar Bennet Butler	me
5. Manuscript Titl Valgus osteoton		ixation for the treatmen	t of proximal femoral deformit	ies due to fibrous dysplasia
6. Manuscript Ide	ntifying Number (if you k	now it)		
Section 2.	The Work Under C	Consideration for Pul	olication	
any aspect of the statistical analysis	submitted work (including	g but not limited to grants	, data monitoring board, study de	mmercial, private foundation, etc.) for sign, manuscript preparation,
Section 3.				
Section 5.	Relevant financial	activities outside th	e submitted work.	
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Are there any relevant conflicts of interest?	Yes	🗸 N	١o
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?		Yes	√ 1	No
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Dr. Harold has nothing to disclose.

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Section 1. Identifying Inform	ation	
1. Given Name (First Name) Cort	2. Surname (Last Name) Lawton	3. Date 21-February-2018
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Bennet Butler
5. Manuscript Title Valgus osteotomy with plate and nail fix	xation for the treatment o	f proximal femoral deformities due to fibrous dysplasia
6. Manuscript Identifying Number (if you kn	now it)	
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Are there any relevant conflicts of interest?		Yes	$\checkmark$	No
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?		Yes	√ 1	No
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1. Given Name (First Name) Terrance	2. Surname (Last Name) Peabody		3. Date 21-August-2017
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Na Bennet Butler	me
5. Manuscript Title Valgus osteotomy with plate and nail	ixation for the treatment of	of proximal femoral deformit	ties due to fibrous dysplasia
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Are there any relevant conflicts of interest?	Yes	🗸 N	١o
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4. Are you the cor	responding author?	Yes 🖌 No	Corresponding Author's Name Bennet Butler
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Are there any relevant conflicts of interest?		Yes	$\checkmark$	No
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Dr. Stover has nothing to disclose.

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