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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
   Naadira

2. Surname (Last Name)  
   Vanker

3. Date  
   15-December-2019

4. Are you the corresponding author?  
   ☑️ No

5. Manuscript Title  
   Optimising β-lactams against tuberculosis

6. Manuscript Identifying Number (if you know it)  
   Blue-201911-2149LE

### 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?  
   ☑️ No

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Are there any relevant conflicts of interest?  
   ☑️ No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

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Dr. Vanker has nothing to disclose.

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) | 2. Surname (Last Name) | 3. Date          |
|---------------------------|--------------------------|------------------|
| Elana                     | Van Brakel               | 10-December-2019 |

4. Are you the corresponding author?  
   - [ ] Yes  
   - X Yes  

| Corresponding Author’s Name |
|-----------------------------|
| Veronique de Jager          |

5. Manuscript Title  
Optimising β-lactams against tuberculosis

6. Manuscript Identifying Number (if you know it)  
Blue-201911-2149LE

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Are there any relevant conflicts of interest?  
- [ ] Yes  
- X Yes

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Are there any relevant conflicts of interest?  
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- X Yes

### Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Van Brakel 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) | Morris          |
|----------------------------|-----------------|
| 2. Surname (Last Name)    | Muliaditan      |
| 3. Date                    | 12-December-2019|
| 4. Are you the corresponding author? | Yes  ✔ No       |
|                            |                 |
| 5. Manuscript Title        | Optimising β-lactams against tuberculosis |
| 6. Manuscript Identifying Number (if you know it) | Blue-201911-2149LE |

Corresponding Author’s Name
Veronique de Jager

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?  ✔ No

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Are there any relevant conflicts of interest?  ✔ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  ✔ No
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Dr. Muliaditan 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)  Veronique
2. Surname (Last Name)  De Jager
3. Date  23-December-2019
4. Are you the corresponding author?  Yes  No
5. Manuscript Title
Optimising β-lactams against tuberculosis
6. Manuscript Identifying Number (if you know it)
Blue-201911-2149LE

Corresponding Author’s Name
Veronique de Jager

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

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Dr. de Jager has no conflicts of interest to declare.

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### Identifying Information

| 1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date |
|----------------------------|------------------------|---------|
| Andreas                    | Diacon                 | 17-December-2019 |

4. Are you the corresponding author?  
- [ ] Yes  
- [x] No  

| Corresponding Author's Name |
|-----------------------------|
| Veronique de Jager          |

5. Manuscript Title  
Optimising β-lactams against tuberculosis

6. Manuscript Identifying Number (if you know it)  
Blue-201911-2149LE

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Are there any relevant conflicts of interest?  
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Dr. Diacon has nothing to disclose.

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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)  
Lize

2. Surname (Last Name)  
van der Merwe

3. Date  
20-December-2019

4. Are you the corresponding author?  
☐ Yes  ☑ No  
Corresponding Author’s Name  
Veronique de Jager

5. Manuscript Title  
Optimising $\beta$-lactams against tuberculosis

6. Manuscript Identifying Number (if you know it)  
Blue-201911-2149LE

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?  
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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.

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Dr. van der Merwe has nothing to disclose.

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