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Author Name:
Affiliation & Address:
CME Activity Title & Date: Miami Neuro Symposium and Miami Neuro Nursing Symposium, November 1-3, 2018

- Circumstances create a conflict of interest when an individual has an opportunity to affect CME content about products or services of a commercial interest with which he/she has a financial relationship.
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DISCLOSURES

Please initial the option that applies to you below and sign the attestation at the bottom:

_____ Neither I, the undersigned, nor my spouse/partner has/had any relevant financial or other relationship(s) with a commercial interest (as defined above) now or within the past 12 months.

_____ Within the past 12 months, I, the undersigned, and/or my spouse/partner had a relevant financial relationship, arrangement and/or affiliation with the organizations or companies noted below.

Describe below what you or your spouse/partner received (ex: salary, honorarium, etc.), and please describe your role.

NOTE: Please do not disclose actual financial value of affiliation(s); diversified mutual funds are not included in the definition of "commercial interest."

<u>Affiliation/Financial Interest</u>	<u>Name(s) of Organization(s)</u>
Grant/Research Support	
Consultant	
Employee	
Speakers Bureau	
Stock Shareholder	
Other Financial or Material Support	

ATTESTATION

I attest that the information provided above is true and correct. I agree to uphold academic standards to ensure balance, independence, objectivity and scientific rigor in my role in the development and presentation of this CME activity. To this end, I will provide the type of evidence and references that support each key teaching point, and my presentation will provide a balanced and objective view of all therapeutic options. I understand and respect that the ACCME SCS requires that educational materials that are part of my CME presentation, such as slides, abstracts and handouts, cannot contain any advertising, trade names, logos or product-group message.

Signature _____ Date _____

Please provide your email address: _____