

ICMJE DISCLOSURE FORM

Date: 3/10/2023

Your Name: Alex Ganninger

Manuscript Title: Biological rhythms in COVID-19 vaccine effectiveness in an observational cohort study of 1.5 million patients.

Manuscript Number (if known): 167339-JCI-CMED-1

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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Date: 3/10/2023

Your Name: Carrie Gierasch

Manuscript Title: Biological rhythms in COVID-19 vaccine effectiveness in an observational cohort study of 1.5 million patients.

Manuscript Number (if known): 167339-JCI-CMED-1

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Date: 3/10/2023

Your Name: David Greenberg

Manuscript Title: Biological rhythms in COVID-19 vaccine effectiveness in an observational cohort study of 1.5 million patients.

Manuscript Number (if known): 167339-JCI-CMED-1

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Date: 3/10/2023

Your Name: Elaine Ostendorf

Manuscript Title: Biological rhythms in COVID-19 vaccine effectiveness in an observational cohort study of 1.5 million patients.

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Your Name: Gabriel Chodick

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ICMJE DISCLOSURE FORM

Date: 3/10/2023

Your Name: Guy Hazan

Manuscript Title: Biological rhythms in COVID-19 vaccine effectiveness in an observational cohort study of 1.5 million patients.

Manuscript Number (if known): 167339-JCI-CMED-1

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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Time frame: past 36 months		
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ICMJE DISCLOSURE FORM

Date: 3/10/2023

Your Name: Hillel Alapi

Manuscript Title: Biological rhythms in COVID-19 vaccine effectiveness in an observational cohort study of 1.5 million patients.

Manuscript Number (if known): 167339-JCI-CMED-1

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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ICMJE DISCLOSURE FORM

Date: 3/10/2023

Your Name: Huram Mok

Manuscript Title: Biological rhythms in COVID-19 vaccine effectiveness in an observational cohort study of 1.5 million patients.

Manuscript Number (if known): 167339-JCI-CMED-1

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ICMJE DISCLOSURE FORM

Date: 3/10/2023

Your Name: Jeffrey Haspel

Manuscript Title: Biological rhythms in COVID-19 vaccine effectiveness in an observational cohort study of 1.5 million patients.

Manuscript Number (if known): 167339-JCI-CMED-1

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1	<input type="checkbox"/> None <table border="1"> <tr> <td>R01 HL135846</td> <td>Institution</td> </tr> <tr> <td>R01 HL152968</td> <td>Institution</td> </tr> <tr> <td colspan="2">Click the tab key to add additional rows.</td> </tr> </table>	R01 HL135846	Institution	R01 HL152968	Institution	Click the tab key to add additional rows.		
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ICMJE DISCLOSURE FORM

Date: 3/10/2023

Your Name: [Or Duek,]

Manuscript Title: Biological rhythms in COVID-19 vaccine effectiveness in an observational cohort study of 1.5 million patients.

Manuscript Number (if known): 167339-JCI-CMED-1

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13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; margin-top: 5px;"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>							

Please place an "X" next to the following statement to indicate your agreement:

☒ I certify that I have answered every question and have not altered the wording of any of the questions on this form.