

ICMJE DISCLOSURE FORM

Date: 9/21/2022

Your Name: Jolien Schölvinck

Manuscript Title: Psychotische klachten bij patiënten met een lichte verstandelijke beperking: een integratieve benadering

Manuscript Number (if known): D6789

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