

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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### Section 1. Identifying Information

1. Given Name (First Name)  
Qigang

2. Surname (Last Name)  
Sun

3. Date  
01-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Jinfang Zheng

5. Manuscript Title

Knockout of lats1 induces neoplastic phenotype in hepatic oval cells through targeting YAP

6. Manuscript Identifying Number (if you know it)

TCR-19-2847

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Dr. Sun has nothing to disclose.

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1. Given Name (First Name) Changxiong	2. Surname (Last Name) Wu	3. Date 01-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jinfang Zheng
5. Manuscript Title Knockout of lats1 induces neoplastic phenotype in hepatic oval cells through targeting YAP		
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1. Given Name (First Name)

Jinfang

2. Surname (Last Name)

Zheng

3. Date

01-April-2020

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

Knockout of lats1 induces neoplastic phenotype in hepatic oval cells through targeting YAP

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Cheng

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1. Given Name (First Name)

Jun

2. Surname (Last Name)

Liu

3. Date

01-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Jinfang Zheng

5. Manuscript Title

Knockout of lats1 induces neoplastic phenotype in hepatic oval cells through targeting YAP

6. Manuscript Identifying Number (if you know it)

TCR-19-2847

### 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.)?

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Li

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01-April-2020

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Jinfang Zheng

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Jinfang

2. Surname (Last Name)

Zheng

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01-April-2020

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