

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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Chunhong	Hu	11-November-2016
Are you the corresponding author?	✓ Yes No	
i. Manuscript Title JSP11 promotes tumorigenesis and 5. Manuscript Identifying Number (if yo	enhances MRI detection in breast cancer	

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.)?

🖌 No

Are there any relevant conflicts of interest?		Yes
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Are there any relevant conflicts of interest?	Yes	\checkmark	No
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?	Yes	🖌 🖌 No)
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Dr. Hu has nothing to disclose.

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Are there any relevant conflicts of interest? Ye	£s √	' No
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