

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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2. The work under consideration for publication.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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Section 1. Identifying Information

1. Given Name (First Name) Can	2. Surname (Last Name) Cui	3. Date 13-June-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiuyun Tian, Chunyi Hao
5. Manuscript Title LAPTM4B-35 expression was correlated with favorable postoperation survival in pancreatic cancer patients		
6. Manuscript Identifying Number (if you know it)		

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Dr. Cui has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Jianhui

2. Surname (Last Name)

Wu

3. Date

13-June-2017

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Xiuyun Tian, Chunyi Hao

5. Manuscript Title

LAPTM4B-35 expression was correlated with favorable postoperation survival in pancreatic cancer patients

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name) Xiaojing	2. Surname (Last Name) Cheng	3. Date 13-June-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiuyun Tian, Chunyi Hao
5. Manuscript Title LAPTM4B-35 expression was correlated with favorable postoperation survival in pancreatic cancer patients		
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1. Given Name (First Name) Liang	2. Surname (Last Name) Yan	3. Date 13-June-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiuyun Tian, Chunyi Hao
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1. Given Name (First Name) Bin	2. Surname (Last Name) Dong	3. Date 13-June-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Xiuyun Tian, Chunyi Hao
5. Manuscript Title LAPTM4B-35 expression was correlated with favorable postoperation survival in pancreatic cancer patients		
6. Manuscript Identifying Number (if you know it)		

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.)?

Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Dong has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Min	2. Surname (Last Name) Zhao	3. Date 13-June-2017
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Section 1. Identifying Information

1. Given Name (First Name)
Xiuyun

2. Surname (Last Name)
Tian

3. Date
13-June-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
LAPTM4B-35 expression was correlated with favorable postoperation survival in pancreatic cancer patients

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Chunyi

2. Surname (Last Name)
Hao

3. Date
13-June-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
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