

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Camilla M.

2. Surname (Last Name)
Grunewald

3. Date
22-June-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Guenter Niegisch

5. Manuscript Title
Tumor immunotherapy—the potential of epigenetic drugs to overcome resistance

6. Manuscript Identifying Number (if you know it)

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Dr. Grunewald has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Wolfgang A.	2. Surname (Last Name) Schulz	3. Date 22-June-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Guenter Niegisch
5. Manuscript Title Tumor immunotherapy—the potential of epigenetic drugs to overcome resistance		
6. Manuscript Identifying Number (if you know it)		

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Dr. Schulz has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Margaretha A.	2. Surname (Last Name) Skowron	3. Date 22-June-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Guenter Niegisch
5. Manuscript Title Tumor immunotherapy—the potential of epigenetic drugs to overcome resistance		
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1. Given Name (First Name) Michèle J.	2. Surname (Last Name) Hoffmann	3. Date 22-June-2018
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