

## ICMJE DISCLOSURE FORM

Date: 9/30/21  
 Your Name: Jyoti Malhotra  
 Manuscript Title: Use of Tumor Cell Lysate to Develop Peptide Vaccine Targeting Cancer-Testis Antigens  
 Manuscript number (if known): \_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. “Related” means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author’s relationships/activities/interests as they relate to the **current manuscript only**.

The author’s relationships/activities/interests should be **defined broadly**. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

|   |  | Name all entities with whom you have this relationship or indicate none (add rows as needed) | Specifications/Comments (e.g., if payments were made to you or to your institution)     |
|---|--|--|---|
| <b>Time frame: Since the initial planning of the work</b> |  |  |   |
| 1   | All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)<br><b>No time limit for this item.</b> | None   |   |
| <b>Time frame: past 36 months</b>                         |  |  |   |
| 2   | Grants or contracts from any entity (if not indicated in item #1 above).   | x  | Bristol-Meyers Squibb, Celldex, Biohaven, Daiichi Sankyo, Beyond Spring Pharmaceuticals |
| 3   | Royalties or licenses  | None   |   |
| 4   | Consulting fees  | None   |   |

|    |  |      |   |
|----|--|------|---|
|    |  |      |   |
| 5  | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | x    | PER CME   |
| 6  | Payment for expert testimony   | None |   |
| 7  | Support for attending meetings and/or travel   | None |   |
| 8  | Patents planned, issued or pending   | None |   |
| 9  | Participation on a Data Safety Monitoring Board or Advisory Board  | x    | Astra-Zeneca, Pfizer, Blueprint Medicines, Mirati Therapeutics, Beigene |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid            | None |   |
| 11 | Stock or stock options   | None |   |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services                             | None |   |
| 13 | Other financial or non-financial interests   | None |   |

**Please summarize the above conflict of interest in the following box:**

Jyoti Malhotra has served on the advisory board for Astra-Zeneca, Blueprint Medicines, Mirati Therapeutics and Beigene; and received research funding from Bristol-Meyers Squibb, Celldex, Biohaven, Daiichi Sankyo and Beyond Spring Pharmaceuticals.

**Please place an "X" next to the following statement to indicate your agreement:**

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

**form.**

## ICMJE DISCLOSURE FORM

Date: 9/30/21  
 Your Name: Janice Mehnert  
 Manuscript Title: Use of Tumor Cell Lysate to Develop Peptide Vaccine Targeting Cancer-Testis Antigens  
 Manuscript number (if known): \_\_\_\_\_

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the **current manuscript only**.

The author's relationships/activities/interests should be **defined broadly**. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

|   |  | Name all entities with whom you have this relationship or indicate none (add rows as needed) | Specifications/Comments (e.g., if payments were made to you or to your institution)          |
|---|--|--|--|
| <b>Time frame: Since the initial planning of the work</b> |  |  |  |
| 1   | All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)<br><b>No time limit for this item.</b> | <u>None</u>  |  |
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|   |  |  |  |
| <b>Time frame: past 36 months</b>                         |  |  |  |
| 2   | Grants or contracts from any entity (if not indicated in item #1 above).   | <u>None</u>  | AMGEN SANOFI Merck Novartis Polynoma<br>AstraZeneca EMDSERONO<br>Bristol-Myers Squibb Incyte |
| 3   | Royalties or licenses  | <u>x</u> <u>None</u>   |  |
| 4   | Consulting fees  | <u>None</u>  | Merck  |

|    |  |  |  |
|----|--|--|--|
| 5  | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | <input type="checkbox"/> None            | Scripps mdanderson, total CME, PER CME                             |
| 6  | Payment for expert testimony   | <input checked="" type="checkbox"/> None |  |
| 7  | Support for attending meetings and/or travel   | <input type="checkbox"/> None            |  |
| 8  | Patents planned, issued or pending   | <input checked="" type="checkbox"/> None |  |
| 9  | Participation on a Data Safety Monitoring Board or Advisory Board  | <input type="checkbox"/> None            | Eisai/Merck Seagen Sanofi EmdSerono BMS<br>Pfizer Regeneron Seagen |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid            | <input checked="" type="checkbox"/> None |  |
| 11 | Stock or stock options   | <input type="checkbox"/> None            | Pfizer   |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services                             | <input checked="" type="checkbox"/> None |  |
| 13 | Other financial or non-financial interests   | <input checked="" type="checkbox"/> None |  |

**Please summarize the above conflict of interest in the following box:**

Janice Mehnert has received consulting fees/honoraria from Merck, Scripps- MD Anderson, Total CME, PER CME; served on advisory board for Eisai/Merck, Seagen, Sanofi, EMD-Sereno, Bristol-Meyers Squibb, Pfizer, Regeneron and Seagen; own stock in Pfizer; and received research funding from Amgen, Sanofi, Merck, Novartis, Polynoma, Astra Zeneca, EMD-Sereno, Bristol-Myers Squibb and Incyte.

**Please place an "X" next to the following statement to indicate your agreement:**

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

