

#### **Instructions**

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Li 1



Section 1.	Identifying Inform	ation			
_	identifying illioni	iation			
1. Given Name (Fi Jia	rst Name)	2. Surname (l Li	Last Name)	3. Date 20-April-20	18
4. Are you the corresponding author?		✓ Yes	No		
•	5. Manuscript Title Mutation burden: a limiting factor for personal cancer vaccines?				
6. Manuscript Idei	ntifying Number (if you kr	now it)			
Section 2.	The Work Under Co	onsideration	for Publication		
Did you or your institution <b>at any time</b> 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 Vo					
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Do you have any		<u> </u>	or issued, broadly relevant to th	e work? Yes	✓ No

Li 2



Section 5.		
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Dr. Li has nothin	g to disclose.	

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Li 3



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Wang-Johanning 2



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Johanning 3