ICMJE Form for Disclosure of Potential Conflicts of Interest

**Instructions**

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Ohgami
ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
   Robert

2. Surname (Last Name)  
   Ohgami

3. Date  
   25-March-2014

4. Are you the corresponding author?  
   ☑ Yes  
   ☐ No

5. Manuscript Title  
   STAT3 mutations are present in aggressive B-cell lymphomas including a subset of diffuse large B-cell lymphomas with CD30 expression

6. Manuscript Identifying Number (if you know it)  
   HAEMATOL/2013/101543

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   ☐ No

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   ☐ No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Dr. Ohgami has nothing to disclose.

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<tr>
<td>Lisa</td>
<td>Ma</td>
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<th>4. Are you the corresponding author?</th>
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<td>Yes</td>
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Dr. Ma has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Ahmad
2. Surname (Last Name) Monabati
3. Date 25-March-2014
4. Are you the corresponding author? ☑ No
5. Manuscript Title STAT3 mutations are present in aggressive B-cell lymphomas including a subset of diffuse large B-cell lymphomas with CD30 expression
6. Manuscript Identifying Number (if you know it) HAEMATOL/2013/101543

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Dr. Monabati has nothing to disclose.

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<tr>
<td>James</td>
<td>Zehnder</td>
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4. Are you the corresponding author? [ ] Yes [ ] No

Corresponding Author’s Name:
Robert Ohgami

5. Manuscript Title
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Dr. Zehnder has nothing to disclose.

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2. Surname (Last Name)  
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Dr. Arber has nothing to disclose.

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