ICMJE Form for Disclosure of Potential Conflicts of Interest

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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

<table>
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<th>2. Surname (Last Name)</th>
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<tbody>
<tr>
<td>Karthik</td>
<td>Ganapathi</td>
<td>28-May-2014</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author? □ Yes  ✔ No

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)
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Dr. Ganapathi 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)  
   Stefania

2. Surname (Last Name)  
   Pittaluga

3. Date  
   28-May-2014

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

   Corresponding Author's Name  
   Dr. Elaine S. Jaffe

5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
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Dr. Pittaluga has nothing to disclose.

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2. Surname (Last Name)  Odejide
3. Date  28-May-2014
4. Are you the corresponding author?  Yes  No
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1. Given Name (First Name)
   - Arnold

2. Surname (Last Name)
   - Freedman

3. Date
   - 28-May-2014

4. Are you the corresponding author? □ Yes ✔ No

   Correspoding Author's Name
   - Jaffe, Elaine

5. Manuscript Title
   - Early lymphoid lesions: conceptual, diagnostic and clinical challenges

6. Manuscript Identifying Number (if you know it)
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If yes, please fill out the appropriate information below.

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Dr. Freedman reports grants from Immunogen, other from Axio, outside the submitted work; .

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1. Given Name (First Name)  Elaine
2. Surname (Last Name)  Jaffe
3. Date  28-May-2014
4. Are you the corresponding author?  Yes  No

5. Manuscript Title
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