

Instructions

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Identifying information.

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Royalties: Funds are coming in to you or your institution due to your patent

lssa 1



Section 1.	Identifying Infor	mation			
1. Given Name (F Nicolas	irst Name)	2. Surname (Last N Issa	lame)	3. Date 15-Octob	er-2019
4. Are you the co	rresponding author?	☐ Yes ✓ No	Correspor	ding Author's Name nond	
5. Manuscript Titl Poxvirus Vector		vent CMV Viremia ir	n Transplant Recipi	ents: A Phase 2, Randomize	ed Clinical Trial.
6. Manuscript Ide M19-2511	ntifying Number (if you l	know it)			
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Section 2.	The Work Under (Consideration for	Publication		
any aspect of the statistical analysis	submitted work (includir , etc.)? levant conflicts of inte	ng but not limited to g	rants, data monitorin	(government, commercial, p g board, study design, manus	
Section 3.	Relevant financia	l activities outsid	e the submitted	work.	
of compensation clicking the "Add Are there any re	n) with entities as desc	ribed in the instruct eport relationships trest?	ions. Use one line f	ave financial relationships or each entity; add as man luring the 36 months pri	y lines as you need by
Name of Entity		Grant? Person	al Non-Financial	Other? Comments	
GSK		✓		Research Grant	
Merck		✓		Research Grant	
Astellas		✓		Research Grant	
AiCuris		✓		Research Grant	
Akros Pharma				Consultant	

lssa 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No
Section 5. Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):
No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
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lssa 3



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Dagis 1



Section 1.	dentifying Inform	ation						
1. Given Name (First I Andrew	, ,		e (Last Name))		3. Date 15-October-2019		
4. Are you the corresp	oonding author?	Yes	√ No	-	Corresponding Author's Name Don J. Diamond, Ph.D.			
5. Manuscript Title Poxvirus Vectored C	IMV Vaccine to Preve	ent CMV Vir	remia in Trar	nsplant Recipie	nts: A Ph	ase 2, Randomized Clinical Trial		
6. Manuscript Identify M-19-2511	ying Number (if you kno	ow it)						
Section 2.	he Work Under Co	nsiderati	on for Pub	olication				
	mitted work (including					ent, commercial, private foundation, etc.) for udy design, manuscript preparation,		
	nt conflicts of intere	st? ✓ Y	es No)				
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excess rows can be	removed by pressing			Ion-Financial	-			
Name of Institution	/Company	Grant?	Fees?	Support?	Other •	Comments		
Helocyte, Inc.; NCI grant.					√	Some salary support, through City of Hope Beckman Research Institute, so I have been told.		
Section 3. R	elevant financial a	activities	outside th	e submitted	work.			
of compensation) w	rith entities as describ	bed in the i	nstructions.	Use one line fo	or each er	cial relationships (regardless of amount ntity; add as many lines as you need by a 26 months prior to publication.		
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Section 4.								
In	itellectual Propert	ty Pater	nts & Copy	rights				
Do you have any pa	tents, whether plann	ned, pendir	ng or issued,	broadly releva	nt to the	work? ☐ Yes ✓ No		

Dagis 2



Section 5. Relationships not severed above
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Mr. Dagis reports salary support from Helocyte, Inc. and NCI grant., during the conduct of the study.

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1. Given Name (Fi RYOTARO	rst Name)	2. Surname (Last	Name)		3. Date 15-October-2019		
4. Are you the cor	responding author?	Yes ✓ N	o Correspond	ding Author's Nam mond	е		
5. Manuscript Title Poxvirus Vectored CMV Vaccine to Prevent CMV Viremia in Transplant Recipients: A Phase 2, Randomized Clinical Trial							
6. Manuscript Idei M19-2511	ntifying Number (if you k	now it)					
Section 2.	The Work Under C	onsideration fo	r Publication				
	ubmitted work (including			-	mercial, private foundation, et gn, manuscript preparation,	c.) for	
	evant conflicts of inter	est? ✓ Yes [No				
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excess rows can	be removed by pressin		nal Non-Financial	2			
Name of Institut	ion/Company	Grant Person Fees	a a	Other Com	ments		
National Cancer Insti	tute	√					
Helocyte				✓ Trial sup	pport		
Section 3.	Relevant financial	activities outsi	de the submitted	work.			
of compensation	n) with entities as descr	ibed in the instruc	tions. Use one line fo	or each entity; ad	tionships (regardless of amo d as many lines as you need onths prior to publication.	d by	
	evant conflicts of inter		No				
If yes, please fill o	out the appropriate inf	ormation below.					
Name of Entity		Grant? Person		Other? Com	ments		
Merck				advisor	y board meeting		
Kyowa Kirin				√ semina	r support		



Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Celgene				√	seminar support
Alexion				✓	lectureship support at a meeting
Continue					
Section 4. Intellectual Propert	y Pate	ents & Co _l	pyrights		
Do you have any patents, whether plann	ed, pend	ing or issue	ed, broadly releva	nt to the	work? Yes No
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At the time of manuscript acceptance, jo On occasion, journals may ask authors to					•
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Rida 1



Section 1. Identifying Inform	nation						
1. Given Name (First Name) Wasima	2. Surname (Last Name) Rida		3. Date 15-October-2019				
4. Are you the corresponding author?	Yes No Corresponding Author's Name Don J. Diamond						
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Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intered If yes, please fill out the appropriate info	y but not limited to grants, da est? Yes No ormation below. If you hav	ta monitoring board, stud	dy design, manuscript preparation,				
Name of Institution/Company	Grant? Personal Nor	n-Financial other?	Comments				
Helocyte	rees 5	прроге при					
Section 3. Relevant financial	activities outside the s	ubmitted work.					
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of intere	ibed in the instructions. Us port relationships that wer	se one line for each enti	ity; add as many lines as you need by				
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Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the w	vork? ☐ Yes ✓ No				

Rida 2



Soction F	
Section 5.	elationships not covered above
	tionships or activities that readers could perceive to have influenced, or that give the appearance of ng, what you wrote in the submitted work?
Yes, the followin	g relationships/conditions/circumstances are present (explain below):
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1. Given Name (First Name) Don	2. Surnan Diamono	ne (Last Name))		3. Date 26-June-2019	
4. Are you the corresponding author?	Yes	√ No		esponding Author's Name tanley Plotkin		
5. Manuscript Title The Status of Vaccination Against the Hu	ıman Cytc	omegalovirus	3			
6. Manuscript Identifying Number (if you kno	ow it)					
Section 2. The Work Under Co	nsiderat	ion for Pub	olication			
Did you or your institution at any time receivany aspect of the submitted work (including statistical analysis, etc.)?						
Are there any relevant conflicts of intere	st? ✓ Y	es No)			
If yes, please fill out the appropriate info Excess rows can be removed by pressing			nave more than	one enti	ty press the "ADD" button to add a row.	
excess rows can be removed by pressing						
Name of Institution/Company	Grant?	Personal N Fees?	Ion-Financial Support?	Other?	Comments	
NIH	✓					
Helocyte Inc	✓					
Section 3. Relevant financial a	ctivities	outside th	e submitted v	work.		
Place a check in the appropriate boxes in of compensation) with entities as described clicking the "Add +" box. You should rep	bed in the	instructions.	Use one line fo	r each er	itity; add as many lines as you need by	
Are there any relevant conflicts of intere	st? ✓ Y	es No)			
If yes, please fill out the appropriate info	rmation b	elow.				
Name of Entity	Grant?	Personal N	Ion-Financial Support <mark>?</mark>	Other?	Comments	
Helocyte Inc	✓	✓		✓	Equity via stock ownership	
Pfizer Inc			✓		Provided PF03512676	



Continu A								
Section 4.	Intellectual	Property -	- Patent	s & Copyri	ghts			
	out the appropr	riate informa	tion belo	w. If you ha	•	ant to the work? n one entity pres	Yes No s the "ADD" button to add	l a row.
Pater	nt?	Pending?	Issued?	Licensed	Royalties ?	Licensee?	Comments	
8,580,276			✓	√	√	Helocyte		
9,675,689			✓	\checkmark	\checkmark	Helocyte		
Section 5.								
Section 3.	Relationshi	ps not cov	ered abo	ove				
Are there other potentially influ					eive to have	influenced, or th	at give the appearance of	
Yes, the follo	owing relationsh	nips/conditio	ns/circun	nstances are	e present (ex	kplain below):		
✓ No other rela	ationships/cond	litions/circur	nstances	that presen	t a potentia	conflict of intere	est	
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Section 6.	Disclosure S	tatement						
Based on the ab	ove disclosures,	, this form w	ill automa	atically gene	erate a disclo	osure statement,	which will appear in the b	ох
other from Held	cyte Inc, non-fi	nancial supp	ort from I	Pfizer Inc, o	utside the s		udy; grants, personal fees n addition, Dr. Diamond h o Helocyte.	



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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

Relationships not covered above.

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Definitions.

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Royalties: Funds are coming in to you or your institution due to your patent

Ariza-Heredia 1



	ı							
Section 1.	Identifying Inform	mation						
1. Given Name (Fi	rst Name)	2. Surname (Last N Ariza-Heredia	ame)	3. Date 26-October-2019				
4. Are you the cor	responding author?	☐ Yes ✓ No	✓ No Corresponding Author's Name Don J. Diamond, Ph.D.					
5. Manuscript Title Poxvirus Vectored CMV Vaccine to Prevent CMV Viremia in Transplant Recipients: A Phase 2, Randomized Clinical Trial								
6. Manuscript Ider M19-2511	ntifying Number (if you k	now it)						
Section 2.	The Work Under C	Consideration for	Publication					
	ubmitted work (includin			•	ent, commercial, private foundation, etc udy design, manuscript preparation,	:.) for		
-	evant conflicts of inter	rest? 🗸 Yes	No					
	out the appropriate inf be removed by pressir	-	ou have more thar	n one enti	ty press the "ADD" button to add a	row.		
Name of Institut	, , , , , , , , , , , , , , , , , , ,	Grant? Persona	Non-Financial Support?	Other?	Comments			
City of Hope				√	Research Grant			
Helocyte Inc.				✓	Research Grant			
Section 3.	Relevant financial	activities outside	e the submitted	work.				
of compensation	n) with entities as desci	ribed in the instructi	ons. Use one line fo	or each en	ial relationships (regardless of amoutity; add as many lines as you need and many lines as you need).			
	evant conflicts of inter		No					
If yes, please fill o	out the appropriate inf	formation below.						
Name of Entity		Grant? Persona	Non-Financial Support?	Other?	Comments			
Merck & Co				√	Research Grant			
Oxford Immunotec				✓	Research Grant			

Ariza-Heredia 2



Section 4.	Intellectual Property Patents & Copyrights
Do you have any	patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume No
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box

Evaluation and Feedback

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Ariza-Heredia 3



Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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LA ROSA 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fi	rst Name)	2. Surname (Last N LA ROSA	lame)	3. Date 15-Octob	er-2019
4. Are you the corresponding author?		Yes ✓ No	Correspon	ding Author's Name	
5. Manuscript Title Poxvirus Vectored CMV Vaccine to Prevent CMV Viremia in Transplant Recipients: A Phase 2, Randomized Clinical Trial					ed Clinical Trial
6. Manuscript Ider M19-2511	ntifying Number (if you kr	now it)			
Sortion 2					
Section 2.	The Work Under Co	onsideration for	Publication		
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to g		(government, commercial, pi g board, study design, manus	
	out the appropriate info be removed by pressin		ou have more thar	n one entity press the "ADI	D" button to add a row.
Name of Institut	ion/Company	Grant? Person Fees?		Other? Comments	
CITY OF HOPE		✓			
HELOCYTE					
	ı				
Section 3.	Relevant financial	activities outsid	e the submitted	work.	
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication .					
Are there any rel	evant conflicts of intere	est? Yes	/ No		
	ı				
Section 4.	Intellectual Proper	ty Patents & C	opyrights		
Do you have any	patents, whether plan	ned, pending or iss	ued, broadly releva	ant to the work? Yes	✓ No

LA ROSA 2



Section 5. Polationships not severed above		
Relationships not covered above		
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?		
Yes, the following relationships/conditions/circumstances are present (explain below):		
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At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.		
Section 6		
Section 6. Disclosure Statement		
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.		
Dr. LA ROSA reports grants from CITY OF HOPE, personal fees from HELOCYTE, during the conduct of the study; .		

Evaluation and Feedback

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Royalties: Funds are coming in to you or your institution due to your patent

Baden 1



Section 1. Identifying In	of a war a time			
Identifying In	itormation			
Given Name (First Name) Lindsey	2. Surname (Last Name) Baden	3. Date 19-October-2019		
4. Are you the corresponding author	? Yes ✓ No	Corresponding Author's Name Don Diamond		
5. Manuscript Title Poxvirus Vectored CMV Vaccine to	5. Manuscript Title Poxvirus Vectored CMV Vaccine to Prevent CMV Viremia in Transplant Recipients: A Phase 2, Randomized Clinical Trial			
6. Manuscript Identifying Number (if M19-2511	you know it)			
Section 2. The Work Und	der Consideration for Public	cation		
any aspect of the submitted work (inc statistical analysis, etc.)?	cluding but not limited to grants, da	n a third party (government, commercial, private foundation, etc.) ata monitoring board, study design, manuscript preparation,	for	
Are there any relevant conflicts of				
If yes, please fill out the appropria Excess rows can be removed by p		ve more than one entity press the "ADD" button to add a ro	W.	
Name of Institution/Company	Grant? Personal Nor	n-Financial Other? Comments		
NCI/NIH/City of Hope	√			
Section 3. Relevant final	ncial activities outside the s	submitted work.		
of compensation) with entities as	described in the instructions. Usuld report relationships that wer interest? Yes No	nether you have financial relationships (regardless of amour se one line for each entity; add as many lines as you need b re present during the 36 months prior to publication .		
Name of Entity	Grant	n-Financial Other? Comments		
Ragon Institute	✓	HIV Vaccine Development		
NIH/NIAID	✓	HIV Vaccine Development		
Gates Foundation	✓	HIV Vaccine Development		

Baden 2



Section 4. Intellectual Property - Patents & Convertebra			
Intellectual Property Patents & Copyrights			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo			
Section 5. Relationships not covered above			
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?			
✓ Yes, the following relationships/conditions/circumstances are present (explain below):			
No other relationships/conditions/circumstances that present a potential conflict of interest			
Dr. Baden is involved in HIV vaccine clinical trials conducted in collaboration with the NIH, HIV Vaccine Trials Network (HVTN), International AIDS Vaccine Initiative (IAVI), Crucell/Janssen, Military HIV Research Program (MHRP), Gates Foundation, and the Ragon Institute.			
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Dr. Baden reports grants from NCI/NIH/City of Hope, during the conduct of the study; grants from Ragon Institute, grants from NIH/NIAID, grants from Gates Foundation, outside the submitted work; and Dr. Baden is involved in HIV vaccine clinical trials conducted in collaboration with the NIH, HIV Vaccine Trials Network (HVTN), International AIDS Vaccine Initiative (IAVI), Crucell/Janssen, Military HIV Research Program (MHRP), Gates Foundation, and the Ragon Institute.			

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Lingaraju 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Chetan Raj	2. Surname (Last Name) Lingaraju	3. Date 15-Octob	er-2019	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Don Diamond		
5. Manuscript Title Poxvirus Vectored CMV Vaccine to Prevent CMV Viremia in Transplant Recipients: A Phase 2, Randomized Clinical Trial			ed Clinical Trial	
6. Manuscript Identifying Number (if you know it) M19-2511				
Section 2. The Work Under Co	onsideration for Public	ation		
Did you or your institution at any time 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 No				
Section 3. Relevant financial	activities outside the s	ubmitted work.		
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo				
Section 4. Intellectual Proper	rty Patents & Copyrig	hts		
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes	✓ No	

Lingaraju 2



Section 5. Polationships not sovered above
Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
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Section 6. Disclosure Statement
Disclosure statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Mr. Lingaraju has nothing to disclose.

Evaluation and Feedback

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Lingaraju 3



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Zhou 1



Section 1. Identifying Inform	nation		
Given Name (First Name) Qiao	2. Surname (Last Name) Zhou	3. Date 15-October-2019	
4. Are you the corresponding author?	✓ Yes No		
5. Manuscript Title Poxvirus Vectored CMV Vaccine to Prevent CMV Viremia in Transplant Recipients: A Phase 2, Randomized Clinical Trial			
6. Manuscript Identifying Number (if you kr	now it)		
Section 2. The Work Under C	onsideration for Publication		
Did you or your institution at any time 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 No			
Section 3. Relevant financial	activities outside the submitted work.		
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Do you have any patents, whether plan	ned, pending or issued, broadly relevant to the work	?	

Zhou 2



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Qiao Zhou has nothing to disclose.

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Zhou 3



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Royalties: Funds are coming in to you or your institution due to your

Martinez 1

patent



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Joy	2. Surname (Last Name) Martinez	3. Date 15-October-2019		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Corinna La Rosa		
5. Manuscript Title Poxvirus Vectored CMV Vaccine to Prevent CMV Viremia in Transplant Recipients: A Phase 2, Randomized Clinical Trial				
6. Manuscript Identifying Number (if you kr M19-2511	now it)			
Section 2. The Work Under Co	onsideration for Publi	cation		
Did you or your institution at any time 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 No				
Section 3. Relevant financial	activities outside the	submitted work.		
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo				
Section 4. Intellectual Proper	rty Patents & Copyric	ghts		
Do you have any patents, whether plan				

Martinez 2



Section 5.			
Section 5.	Relationships not covered above		
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?		
Yes, the following relationships/conditions/circumstances are present (explain below):			
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest		
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.			
Section 6.	Disclosure Statement		
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box		
Dr. Martinez has	nothing to disclose.		

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Martinez 3



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Kaltcheva 1



Section 1. Iden	tifying Information			
Given Name (First Name) Teodora	e) 2. Surn Kaltch	ame (Last Name) eva		3. Date 15-October-2019
4. Are you the correspond	ling author? Yes	✓ No	Corresponding Author's Nam Don Diamond, PhD	ne
5. Manuscript Title Poxvirus Vectored CMV	Vaccine to Prevent CMV	Viremia in Tran	splant Recipients: A Phase 2, R	andomized Clinical Trial
6. Manuscript Identifying	Number (if you know it)			
			_	
Section 2. The V	Vork Under Consider	ation for Pub	lication	
	ed work (including but not l		m a third party (government, com data monitoring board, study desi	nmercial, private foundation, etc.) for ign, manuscript preparation,
Section 3. Relev	vant financial activiti	es outside the	submitted work.	
of compensation) with e	entities as described in the c. You should report relat	ne instructions.		tionships (regardless of amount dd as many lines as you need by onths prior to publication.
Section 4. Intel	ectual Property Pa	tents & Copyı	ights	
Do you have any patent	s, whether planned, pen	ding or issued,	oroadly relevant to the work?	☐ Yes ✓ No

Kaltcheva 2



Section 5.	Relationships not covered above				
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?				
	Yes, the following relationships/conditions/circumstances are present (explain below): No other relationships/conditions/circumstances that present a potential conflict of interest				
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Section 6.	Disclosure Statement				
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patent

Hardwick 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Nicola		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Don J Diamond
5. Manuscript Title Poxvirus Vectored CMV Vaccine to Prev	rent CMV Viremia in Transp	plant Recipients: A Phase 2, Randomized Clinical Trial
6. Manuscript Identifying Number (if you kr M19-2511	now it)	
Section 2. The Work Under Co	onsideration for Publi	cation
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Section 3. Relevant financial	activities outside the	submitted work.
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Section 4. Intellectual Proper	rty Patents & Copyri	ghts
Do you have any patents, whether plan		

Hardwick 2



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Dr. Hardwick has	nothing to disclose.

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Nademanee 1



Section 1. Identifying Inform	nation			
Given Name (First Name) Auayporn	2. Surname (Last Name) Nademanee	3. Date 18-October-2019		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Don Diamond		
5. Manuscript Title Poxvirus Vectored CMV Vaccine to Pres	vent CMV Viremia in Transp	plant Recipients: A Phase 2, Randomized Clinical Trial"		
6. Manuscript Identifying Number (if you k M19-2511	now it)	_		
Section 2. The Work Under C	Consideration for Public	cation		
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,		
Section 3. Relevant financial	activities outside the s	submitted work.		
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Section 4. Intellectual Prope	ota Datasta 0.C	de.		
Intellectual Prope	rty Patents & Copyric	ints ———		
Do you have any patents, whether plan	nned, pending or issued, br	roadly relevant to the work? Yes V No		

Nademanee 2



Section 5. Relationships not severed above
Relationships not covered above
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nothing to be disclosed

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AL MALKI 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi MONZR M.	rst Name)	2. Surname (Last Name) AL MALKI	3. Date 25-October-2019
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Ryotaro Nakamura, M.D.
5. Manuscript Title Poxvirus Vectore		rent CMV Viremia in Transp	plant Recipients: A Phase 2, Randomized Clinical Trial
6. Manuscript Ide M19-2511	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Public	cation
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Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

AL MALKI 2



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AL MALKI 3



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forman 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi stephen	rst Name)	2. Surname (Last Name) forman	3. Date 26-December-2019
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name don diamond
5. Manuscript Title pox virus vector	e ed cmv vaccine to prev	vent cmv viremia	
6. Manuscript Ide M19-2511	ntifying Number (if you kr	now it)	
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forman 2



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Dr. forman has nothing to disclose.

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Identifying information.

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Royalties: Funds are coming in to you or your institution due to your patent

Aldoss 1



Section 1.	Identifying Inform	nation			
Identifying Information					
1. Given Name (Fi	rst Name)	2. Surname (Last Nam Aldoss	ee)	3. Date 06-November-	-2019
4. Are you the cor	responding author?	Yes ✓ No	Corresponding	g Author's Name d	
5. Manuscript Title Poxvirus Vectore		vent CMV Viremia in Tr	ansplant Recipients	s: A Phase 2, Randomized Cli	nical Trial
6. Manuscript Ider M19-2511	ntifying Number (if you kr	now it)			
Section 2.	The Work Under C	onsideration for Pu	ıblication		
any aspect of the s statistical analysis, Are there any rel If yes, please fill o	ubmitted work (including etc.)? evant conflicts of inter	g but not limited to grant est? Yes Normation below. If you	s, data monitoring bo	overnment, commercial, private pard, study design, manuscript ne entity press the "ADD" bu	preparation,
Name of Institut			Non-Financial Support?	ther? Comments	
Helocyte					
Continue 2					
Section 3.	Relevant financial	activities outside t	he submitted wo	ork.	
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Name of Entity		Grant? Personal Fees?	Non-Financial Support?	ther? Comments	
Helocyte				Advisory Board	

Aldoss 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume
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Dr. Aldoss reports grants from Helocyte, during the conduct of the study; personal fees from Helocyte, from null, outside the submitted work; .

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Longmate 1



Section 1.	Identifying Inform	nation					
1. Given Name (First Name) Jeffrey		2. Surname (Last Nan Longmate	ne)	3. Date 26-October-2019			
4. Are you the corresponding author?		☐ Yes ✓ No	-	Corresponding Author's Name Don Diamond			
5. Manuscript Title Poxvirus Vectored CMV Vaccine to Prevent CMV Viremia in Transplant Recipients: A Phase 2, Randomized Clinical Trial						nical Trial	
6. Manuscript Idei	ntifying Number (if you kn	now it)					
Section 2.	The Work Under Co	onsideration for Pu	ublication				
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NIH		✓		Supp	oorted effort on R01 nond	to Don	
Section 3.	Relevant financial	activities outside t	he submitted	work.			
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Section 4.	Intellectual Proper	ty Patents & Cop	yrights				
Do you have any	patents, whether plan	ned, pending or issue	d, broadly releva	nt to the work	☐ Yes ✓</td <td>No</td> <td></td>	No	

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Section 5. Relationships not sovered above			
Relationships not covered above			
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Dr. Longmate reports grants from NIH, during the conduct of the study; .			

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Farol 1



Section 1.	Identifying Inform	ation			
1. Given Name (First Name) Len		2. Surname (Last Name) Farol		3. Date 02-January-2020	
4. Are you the corresponding author?		✓ Yes No			
5. Manuscript Title Poxvirus Vectored CMV Vaccine to Prevent CMV Viremia in Transplant Recipients: A Phase 2, Randomized Clinical Trial					
6. Manuscript Ider M19-2511	ntifying Number (if you kr	ow it)			
	ı				
Section 2.	The Work Under Co	onsideration for Publica	tion		
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Section 3.	Relevant financial	activities outside the su	bmitted work.		
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Section 4.	Intellectual Proper	ty Patents & Copyrigh	tc		
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Do you have any	patents, whether plan	ned, pending or issued, broa	dly relevant to the work?	? ☐ Yes ✓ No	

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