ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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### Section 1. Identifying Information

1. **Given Name (First Name)**
   Young Woo

2. **Surname (Last Name)**
   Eom

3. **Date**
   24-April-2020

4. **Are you the corresponding author?**
   [ ] Yes  ✔ No

   **Corresponding Author’s Name**
   Soon Koo Baik

5. **Manuscript Title**
   Mesenchymal stem cells to treat liver diseases

6. **Manuscript Identifying Number (if you know it)**
   ATM-2019-SCCA-03

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Dr. Eom 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)  Seong Hee
2. Surname (Last Name)  Kang
3. Date  24-April-2020
4. Are you the corresponding author?  ✔ No
5. Manuscript Title
Mesenchymal stem cells to treat liver diseases
6. Manuscript Identifying Number (if you know it)
ATM-2019-SCCA-03

Section 2. The Work Under Consideration for Publication

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Dr. Kang has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Moon Young
2. Surname (Last Name)  Kim
3. Date  24-April-2020
4. Are you the corresponding author?  No
Corresponding Author’s Name  Soon Koo Baik

5. Manuscript Title
Mesenchymal stem cells to treat liver diseases

6. Manuscript Identifying Number (if you know it)
ATM-2019-SCCA-03

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## Section 1. Identifying Information

1. Given Name (First Name)  
   Jong In  
2. Surname (Last Name)  
   Lee  
3. Date  
   24-April-2020  
4. Are you the corresponding author?  
   Yes ☐  No ☑  
   Corresponding Author’s Name  
   Soon Koo Baik  
5. Manuscript Title  
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6. Manuscript Identifying Number (if you know it)  
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1. Given Name (First Name)  
   Soon Koo

2. Surname (Last Name)  
   Baik

3. Date  
   24-April-2020

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