

ICMJE DISCLOSURE FORM

Date: 08/04/2021

Your Name: Ayelet Grupper

Manuscript Title: Low immunogenicity to SARS-CoV-2 vaccination among liver transplant recipients

Manuscript number (if known): JHEPAT-D-21-00743

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 09/04/2021

Your Name: Dan Turner

Manuscript Title: Low immunogenicity to SARS-CoV-2 vaccination among liver transplant recipients

Manuscript number (if known): JHEPAT-D-21-00743

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ICMJE DISCLOSURE FORM

Date: 09/04/2021

Your Name: Eugene Katchman

Manuscript Title: Low immunogenicity to SARS-CoV-2 vaccination among liver transplant recipients

Manuscript number (if known): JHEPAT-D-21-00743

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ICMJE DISCLOSURE FORM

Date: 09/04/2021

Your Name: Helena Katchman

Manuscript Title: Low immunogenicity to SARS-CoV-2 vaccination among liver transplant recipients

Manuscript number (if known): JHEPAT-D-21-00743

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ICMJE DISCLOSURE FORM

Date: 09/04/2021

Your Name: Inbal Hour

Manuscript Title: Low immunogenicity to SARS-CoV-2 vaccination among liver transplant recipients

Manuscript number (if known): JHEPAT-D-21-00743

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ICMJE DISCLOSURE FORM

Date: 08/04/2021

Your Name: Liane Rabinowich

Manuscript Title: Low immunogenicity to SARS-CoV-2 vaccination among liver transplant recipients

Manuscript number (if known): JHEPAT-D-21-00743

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ICMJE DISCLOSURE FORM

Date: 09/04/2021

Your Name: Merav Ben-Yehoyada

Manuscript Title: Low immunogenicity to SARS-CoV-2 vaccination among liver transplant recipients

Manuscript number (if known): JHEPAT-D-21-00743

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Date: 09/04/2021

Your Name: Nir Lubezky

Manuscript Title: Low immunogenicity to SARS-CoV-2 vaccination among liver transplant recipients

Manuscript number (if known): JHEPAT-D-21-00743

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Date: 08/04/2021

Your Name: Oren Shibolet

Manuscript Title: Low immunogenicity to SARS-CoV-2 vaccination among liver transplant recipients

Manuscript number (if known): JHEPAT-D-21-00743

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ICMJE DISCLOSURE FORM

Date: 08/04/2021

Your Name: Roni Baruch

Manuscript Title: Low immunogenicity to SARS-CoV-2 vaccination among liver transplant recipients

Manuscript number (if known): JHEPAT-D-21-00743

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ICMJE DISCLOSURE FORM

Date: 09/04/2021

Your Name: Sharon Levi

Manuscript Title: Low immunogenicity to SARS-CoV-2 vaccination among liver transplant recipients

Manuscript number (if known): JHEPAT-D-21-00743

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Date: 09/04/2021

Your Name: Tami Halperin

Manuscript Title: Low immunogenicity to SARS-CoV-2 vaccination among liver transplant recipients

Manuscript number (if known): JHEPAT-D-21-00743

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