

ICMJE Form for Disclosure of Potential Conflicts of Interest

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.

1. Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

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4. Intellectual Property.

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

5. Relationships not covered above.

Use this section to report 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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Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Shuta

2. Surname (Last Name)
Ohara

3. Date
21-August-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Tetsuya Mitsudomi

5. Manuscript Title
Prognostic implications of preoperative versus postoperative circulating tumor DNA in surgically resected lung cancer patients

6. Manuscript Identifying Number (if you know it)
TLCR-20-505-R1

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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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. Ohara has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
Kenichi

2. Surname (Last Name)
Suda

3. Date
21-August-2020

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Tetsuya Mitsudomi

5. Manuscript Title
Prognostic implications of preoperative versus postoperative circulating tumor DNA in surgically resected lung cancer patients

6. Manuscript Identifying Number (if you know it)
TLCR-20-505-R1

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
AstraZeneca	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Boehringer-Ingelheim	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rain Therapeutics	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Suda reports personal fees from AstraZeneca, grants and personal fees from Boehringer-Ingelheim, grants from Rain Therapeutics, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Kazuko 2. Surname (Last Name) Sakai 3. Date 21-August-2020

4. Are you the corresponding author? Yes No Corresponding Author's Name
Tetsuya Mitsudomi

5. Manuscript Title
Prognostic implications of preoperative versus postoperative circulating tumor DNA in surgically resected lung cancer patients

6. Manuscript Identifying Number (if you know it)
TLCR-20-505-R1

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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Roche Diagnostics	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Bio-Rad	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
SRL Diagnostics	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
AstraZeneca	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Chugai Pharmaceutical	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Sakai reports personal fees from Roche Diagnostics, personal fees from Bio-Rad, personal fees from SRL Diagnostics, personal fees from AstraZeneca, personal fees from Chugai Pharmaceutical, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Masaya	2. Surname (Last Name) Nishino	3. Date 21-August-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Tetsuya Mitsudomi
5. Manuscript Title Prognostic implications of preoperative versus postoperative circulating tumor DNA in surgically resected lung cancer patients		
6. Manuscript Identifying Number (if you know it) TLCR-20-505-R1		

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Nishino has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Masato	2. Surname (Last Name) Chiba	3. Date 21-August-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Tetsuya Mitsudomi
5. Manuscript Title Prognostic implications of preoperative versus postoperative circulating tumor DNA in surgically resected lung cancer patients		
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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Chiba has nothing to disclose.

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Masaki

2. Surname (Last Name)
Shimoji

3. Date
21-August-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Tetsuya Mitsudomi

5. Manuscript Title
Prognostic implications of preoperative versus postoperative circulating tumor DNA in surgically resected lung cancer patients

6. Manuscript Identifying Number (if you know it)
TLCR-20-505-R1

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Shimoji has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Toshiki

2. Surname (Last Name)

Takemoto

3. Date

21-August-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Tetsuya Mitsudomi

5. Manuscript Title

Prognostic implications of preoperative versus postoperative circulating tumor DNA in surgically resected lung cancer patients

6. Manuscript Identifying Number (if you know it)

TLCR-20-505-R1

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Are there any relevant conflicts of interest? Yes No

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Dr. Takemoto 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)
Toshio

2. Surname (Last Name)
Fujino

3. Date
21-August-2020

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Tetsuya Mitsudomi

5. Manuscript Title
Prognostic implications of preoperative versus postoperative circulating tumor DNA in surgically resected lung cancer patients

6. Manuscript Identifying Number (if you know it)
TLCR-20-505-R1

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Novartis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Apollomics.Inc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Fujino reports personal fees from Novartis, grants from Apollomics.Inc., outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Takamasa	2. Surname (Last Name) Koga	3. Date 21-August-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Tetsuya Mitsudomi
5. Manuscript Title Prognostic implications of preoperative versus postoperative circulating tumor DNA in surgically resected lung cancer patients		
6. Manuscript Identifying Number (if you know it) TLCR-20-505-R1		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Koga 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)
Akira

2. Surname (Last Name)
Hamada

3. Date
21-August-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Tetsuya Mitsudomi

5. Manuscript Title
Prognostic implications of preoperative versus postoperative circulating tumor DNA in surgically resected lung cancer patients

6. Manuscript Identifying Number (if you know it)
TLCR-20-505-R1

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Are there any relevant conflicts of interest? Yes No

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Dr. Hamada 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) Junichi	2. Surname (Last Name) Soh	3. Date 21-August-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Tetsuya Mitsudomi
5. Manuscript Title Prognostic implications of preoperative versus postoperative circulating tumor DNA in surgically resected lung cancer patients		
6. Manuscript Identifying Number (if you know it) TLCR-20-505-R1		

Section 2. The Work Under Consideration 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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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Section 5. Relationships not covered above

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Section 6. Disclosure Statement

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Dr. Soh has nothing to disclose.

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4. Intellectual Property.

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Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

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

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Section 1. Identifying Information

1. Given Name (First Name)
Kazuto

2. Surname (Last Name)
Nishio

3. Date
21-August-2020

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Tetsuya Mitsudomi

5. Manuscript Title
Prognostic implications of preoperative versus postoperative circulating tumor DNA in surgically resected lung cancer patients

6. Manuscript Identifying Number (if you know it)
TLCR-20-505-R1

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Otsuka Pharmaceutical	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Life Technologies Japan	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Boehringer Ingelheim	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Eli Lilly	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Chugai Pharmaceutical	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Eisai	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pfizer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Novartis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
MSD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ono Pharmaceutical	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Bristol-Myers Squibb	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
SymBio Pharmaceuticals Limited	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Solasia Pharma	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Yakult Honsha	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Roche Diagnostics	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
AstraZeneca	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sanofi	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Guardant Health	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Takeda	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Kobayashi Pharmaceutical	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ignyta	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Astellas	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Nishio reports grants and personal fees from Otsuka Pharmaceutical, grants and personal fees from Life Technologies Japan, grants and personal fees from Boehringer Ingelheim, grants and personal fees from Eli Lilly, personal fees from Chugai Pharmaceutical, personal fees from Eisai, personal fees from Pfizer, personal fees from Novartis, personal fees from MSD, personal fees from Ono Pharmaceutical, personal fees from Bristol-Myers Squibb, personal fees from Symbio Pharmaceuticals Limited, personal fees from Solasia Pharma, personal fees from Yakult Honsha, personal fees from Roche Diagnostics, personal fees from AstraZeneca, personal fees from Sanofi, personal fees from Guardant Health, personal fees from Takeda, personal fees from Kobayashi Pharmaceutical, grants from Ignyta, grants from Astellas, outside the submitted work; .

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

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Section 1. Identifying Information

1. Given Name (First Name)
Tetsuya

2. Surname (Last Name)
Mitsudomi

3. Date
12-August-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Prognostic implications of preoperative versus postoperative circulating tumor DNA in surgically resected lung cancer patients

6. Manuscript Identifying Number (if you know it)
TLCR-20-505-R1

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Pfizer	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MSD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Chugai	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ono	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Eli-Lilly	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Daiichi-Sankyo	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
ThermoFisher	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Guardant	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Taiho	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Amgen	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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