ICMJE Form for Disclosure of Potential Conflicts of Interest

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4. **Intellectual Property.**
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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Motunrayo

2. Surname (Last Name)  
   Adekunle

3. Date  
   12-July-2020

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

5. Manuscript Title  
   Epidemiology of Adolescents Living with Perinatally Acquired HIV Infection in A Tertiary Institution in Lagos State, Nigeria

6. Manuscript Identifying Number (if you know it)  
   AOI-19-13

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   ✔ No

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   ☐ 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?  
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Section 6. Disclosure Statement

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Dr. Adekunle 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)  
Peter

2. Surname (Last Name)  
Ubuane

3. Date  
11-July-2020

4. Are you the corresponding author?  
☐ Yes  ☑ No  
Corresponding Author's Name  
Motunrayo Adekunle

5. Manuscript Title  
Epidemiology of Adolescents Living with Perinatally Acquired HIV Infection in A Tertiary Institution in Lagos State, Nigeria

6. Manuscript Identifying Number (if you know it)  
AOI-19-13

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Dr. Ubuane has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   Barakat

2. Surname (Last Name)  
   Animasahun

3. Date  
   12-July-2020

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

   Corresponding Author's Name  
   Motunrayo Adekunle

5. Manuscript Title  
   Epidemiology of Adolescents Living with Perinatally Acquired HIV Infection in A Tertiary Institution in Lagos State, Nigeria

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

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Section 1. Identifying Information

1. Given Name (First Name)  Maria
2. Surname (Last Name)  Afadapa
3. Date  12-July-2020
4. Are you the corresponding author?  ☑ No

5. Manuscript Title
Epidemiology of Adolescents Living with Perinatally Acquired Hiv Infection in A Tertiary Institution in Lagos State, Nigeria

6. Manuscript Identifying Number (if you know it)
AOI-19-13

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Are there any relevant conflicts of interest?  ☑ Yes  ☑ No

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Dr. Afadapa has nothing to disclose.

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Akinola
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Monsuru

2. Surname (Last Name)  
   Akinola

3. Date  
   12-July-2020

4. Are you the corresponding author?  
   ✔ No

5. Manuscript Title  
   Epidemiology of Adolescents Living with Perinatally Acquired Hiv Infection in A Tertiary Institution in Lagos State, Nigeria

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Dr. Akinola has nothing to disclose.

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