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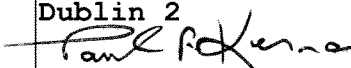

VIII-4-1	<p><b>Declaration: Inventorship (only for the purposes of the designation of the United States of America)</b>                  Declaration of Inventorship (Rules 4.17(iv) and 51bis.1(a)(iv)) for the purposes of the designation of the United States of America:</p>	<p>I hereby declare that I believe I am the original inventor or an original joint inventor of a claimed invention in the application.</p> <p>This declaration is directed to the international application of which it forms a part.</p> <p>I hereby declare that the above-identified international application was made or authorized to be made by me.</p> <p>I hereby acknowledge that any willful false statement made in this declaration is punishable under 18 U.S.C. 1001 by fine or imprisonment of not more than five (5) years, or both.</p>
VIII-4-1-1-1	Name (LAST, First)	CHADDERTON, Naomi
VIII-4-1-1-2	Residence: (city and either US state, if applicable, or country)	Dublin, Ireland
VIII-4-1-1-3	Mailing Address:	Department of Genetics, School of Genetics and Microbiology Trinity College Dublin, The University of Dublin College Green Dublin 2
VIII-4-1-1-4	Inventor's Signature: (The signature must be that of the inventor, not that of the agent)	
VIII-4-1-1-5	Date:	18/12/18
VIII-4-1-2-1	Name (LAST, First)	FARRAR, Gwenyth Jane
VIII-4-1-2-2	Residence: (city and either US state, if applicable, or country)	Dublin, Ireland
VIII-4-1-2-3	Mailing Address:	Department of Genetics, School of Genetics and Microbiology Trinity College Dublin, The University of Dublin College Green Dublin 2
VIII-4-1-2-4	Inventor's Signature: (The signature must be that of the inventor, not that of the agent)	
VIII-4-1-2-5	Date:	18/12/18

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VIII-4-1-3-1	Name (LAST, First)	<b>HANLON, Killian</b>
VIII-4-1-3-2	Residence: (city and either US state, if applicable, or country)	<b>Dublin, Ireland</b>
VIII-4-1-3-3	Mailing Address:	<b>Department of Genetics, School of Genetics and Microbiology Trinity College Dublin, The University of Dublin College Green Dublin 2</b>
VIII-4-1-3-4	Inventor's Signature: (The signature must be that of the inventor, not that of the agent)	
VIII-4-1-3-5	Date:	
VIII-4-1-4-1	Name (LAST, First)	<b>KENNA, Paul, F</b>
VIII-4-1-4-2	Residence: (city and either US state, if applicable, or country)	<b>Dublin, Ireland</b>
VIII-4-1-4-3	Mailing Address:	<b>Department of Genetics, School of Genetics and Microbiology Trinity College Dublin, The University of Dublin College Green Dublin 2</b>
VIII-4-1-4-4	Inventor's Signature: (The signature must be that of the inventor, not that of the agent)	
VIII-4-1-4-5	Date:	19/12/2018
VIII-4-1-5-1	Name (LAST, First)	<b>PALFI, Arpad</b>
VIII-4-1-5-2	Residence: (city and either US state, if applicable, or country)	<b>Dublin, Ireland</b>
VIII-4-1-5-3	Mailing Address:	<b>Department of Genetics, School of Genetics and Microbiology Trinity College Dublin, The University of Dublin College Green Dublin 2</b>
VIII-4-1-5-4	Inventor's Signature: (The signature must be that of the inventor, not that of the agent)	
VIII-4-1-5-5	Date:	18/12/18

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VIII-4-1-6-1	Name (LAST, First)	MILLINGTON WARD, Sophia
VIII-4-1-6-2	Residence: (city and either US state, if applicable, or country)	Dublin, Ireland
VIII-4-1-6-3	Mailing Address:	Department of Genetics, School of Genetics and Microbiology Trinity College Dublin, The University of Dublin College Green Dublin 2
VIII-4-1-6-4	Inventor's Signature: (The signature must be that of the inventor, not that of the agent)	<i>Sophia Millington-Ward</i>
VIII-4-1-6-5	Date:	18/12/12

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VIII-4-1-3-1	Name (LAST, First)	HANLON, Killian
VIII-4-1-3-2	Residence: (city and either US state, if applicable, or country)	Dublin, Ireland
VIII-4-1-3-3	Mailing Address:	Department of Genetics, School of Genetics and Microbiology Trinity College Dublin, The University of Dublin College Green Dublin 2
VIII-4-1-3-4	Inventor's Signature: (The signature must be that of the inventor, not that of the agent)	
VIII-4-1-3-5	Date:	18/12/2018
VIII-4-1-4-1	Name (LAST, First)	KENNA, Paul, F
VIII-4-1-4-2	Residence: (city and either US state, if applicable, or country)	Dublin, Ireland
VIII-4-1-4-3	Mailing Address:	Department of Genetics, School of Genetics and Microbiology Trinity College Dublin, The University of Dublin College Green Dublin 2
VIII-4-1-4-4	Inventor's Signature: (The signature must be that of the inventor, not that of the agent)	
VIII-4-1-4-5	Date:	
VIII-4-1-5-1	Name (LAST, First)	PALFI, Arpad
VIII-4-1-5-2	Residence: (city and either US state, if applicable, or country)	Dublin, Ireland
VIII-4-1-5-3	Mailing Address:	Department of Genetics, School of Genetics and Microbiology Trinity College Dublin, The University of Dublin College Green Dublin 2
VIII-4-1-5-4	Inventor's Signature: (The signature must be that of the inventor, not that of the agent)	
VIII-4-1-5-5	Date:	