

#### **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.

## Identifying information.

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# 4. Intellectual Property.

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

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Section 1.	Identifying Inform	nation					
		2. Surname (Last Name) Liang		3. Date 27-September-2020			
4. Are you the corresponding author?		☐ Yes ✓ No		Corresponding Author's Name Wen-xu Hong and Yun-ping Xu			
5. Manuscript Title DNA sequence a	e nalysis and Jk blood gr	oup genotype	-phenotype	assessment			
6. Manuscript Ider ATM-20-6504	ntifying Number (if you kr	now it)					
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Section 2.	The Work Under C	onsideration	for Public	ation			
any aspect of the s statistical analysis,	ctitution <b>at any time</b> rece ubmitted work (including etc.)? evant conflicts of intere	but not limited					
If yes, please fill o	out the appropriate info	ormation below	w. If you hav	e more than	one enti	ty press the "ADD" bu	utton to add a row.
Name of Institut		Grant? Per	sonal Nor	n-Financial	Other?	Comments	
The Chinese Society o	of Blood Transfusion	<b>✓</b>				CSBT-WG-2018-09	
Section 3.	Relevant financial	activities ou	tside the s	ubmitted v	work.		
of compensation clicking the "Add	the appropriate boxes i ) with entities as descri   +" box. You should rep evant conflicts of intere	ibed in the inst port relationsh	ructions. Us	se one line fo	r each en	tity; add as many line	es as you need by
Section 4.	Intellested Duran	de Dodoudo	9.60	.b.s.			
	Intellectual Proper	<u> </u>					
Do you have any	patents, whether plan	ned, pending o	or issued, br	oadly relevar	nt to the	work? Yes	No



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Dr. Liang reports grants from The Chinese Society of Blood Transfusion, during the conduct of the study; .

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Su 1



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1. Given Name (First Name) Yu-qing	2. Surname (Last Name) Su	3. Date 27-September-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Wen-xu Hong and Yun-ping Xu
5. Manuscript Title DNA sequence analysis and Jk blood g	roup genotype-phenotype	e assessment
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Relevant financial	activities outside the	submitted work.
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Intellectual Prope	rty Patents & Copyri	gnts
Do you have any patents, whether plar	nned, pending or issued, b	roadly relevant to the work? Yes Vo

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Dr. Su has nothing to disclose.

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5. Manuscript Title DNA sequence analysis and Jk blood g	roup genotype-phenotype	e assessment
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Wu 1



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1. Given Name (First Name) Fan	2. Surname (Last Name) Wu	3. Date 27-September-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Wen-xu Hong and Yun-ping Xu
5. Manuscript Title DNA sequence analysis and Jk blood gr	roup genotype-phenotype	e assessment
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Wu 2



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1 Zhang



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Did you or your ins any aspect of the s statistical analysis,	ubmitted work (including	ve payment or servi	ces from a third party		mercial, private foundation, e gn, manuscript preparation,	tc.) for
	out the appropriate info be removed by pressing		you have more thar	one entity press	the "ADD" button to add	a row.
Name of Institut	ion/Company	Grant? Persor		Other? Comm	nents	
Shenzhen Science an Commission	d technology innovation	<b>✓</b>		JCYJ201	80302153621300	
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Are there any rel	evant conflicts of intere	est? Yes [	✓ No			
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Do you have any	patents, whether plan	ned, pending or is	sued, broadly releva	nt to the work?	Yes ✓ No	

Zhang 2



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Dr. Zhang report study; .	ts grants from Shenzhen Science and technology innovation Commission, during the conduct of the

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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

Shi 1



Section 1. Identifying Inform	mation		
1. Given Name (First Name) Jia-hai	2. Surname (Last Name) Shi	3. Date 27-September-2020	
4. Are you the corresponding author? Yes ✓ No		Corresponding Author's Name Wen-xu Hong and Yun-ping Xu	
5. Manuscript Title DNA sequence analysis and Jk blood g	group genotype-phenotyp	e assessment	
6. Manuscript Identifying Number (if you k ATM-20-6504	know it)	_	
Section 2. The Week Heder			
The work Under C	Consideration for Publi		
	ng but not limited to grants, d	n a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,	
Section 3. Relevant financia	l activities outside the	submitted work	
Place a check in the appropriate boxes of compensation) with entities as desc	s in the table to indicate wh cribed in the instructions. U eport relationships that we	nether you have financial relationships (regardless of amount lse one line for each entity; add as many lines as you need by ere present during the 36 months prior to publication.	
Section 4			
Section 4. Intellectual Prope	erty Patents & Copyri	ghts	
Do you have any patents, whether plan	nned, pending or issued, b	roadly relevant to the work? Yes V No	

Shi 2



Section 5. Polotionships not solvered above
Relationships not covered above
Are there 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?
Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.
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. Shi has nothing to disclose.

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#### **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.

## 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.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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Hong 1



Section 1.	Identifying Inform	nation					
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4. Are you the corresponding author?		✓ Yes No					
5. Manuscript Title DNA sequence analysis and Jk blood group genotype-phenotype assessment							
6. Manuscript Ider ATM-20-6504	ntifying Number (if you kr	now it)					
Section 2.	The Work Under Co	oncidoration for	Dublication				
Did you or your ins any aspect of the s statistical analysis, Are there any relatives If yes, please fill of	stitution <b>at any time</b> rece ubmitted work (including etc.)? evant conflicts of intere	ive payment or service but not limited to great? Yes cormation below. If y	es from a third party ants, data monitoring	g board, study o	commercial, private foundation, etc.) for design, manuscript preparation, ress the "ADD" button to add a row.		
Name of Institut		Grant? Persona	Non-Financial Support?	Other? Co	omments		
Shenzhen Municipal	Health Commission	<b>✓</b>		SZSI	M201811092		
Section 3.	Relevant financial	activities outsid	the submitted	work.			
of compensation clicking the "Add	the appropriate boxes i ) with entities as descri	in the table to indic ibed in the instructi port relationships th	ate whether you ha	ave financial ro or each entity;	elationships (regardless of amount; add as many lines as you need by months prior to publication.		
Section 4.	Intellectual Proper	rty Patents & C	opyrights				
Do you have any	patents, whether plan	ned, pending or iss	ued, broadly releva	ant to the wor	k?		

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Dr. Hong reports grants from Shenzhen Municipal Health Commission, during the conduct of the study; .					

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patent

Xu 1



Section 1.	Identifying Information						
Given Name (First Name) Yun-ping		2. Surname (Last Name) Xu			3. Date 27-September-2020		
4. Are you the corresponding author?		✓ Yes No					
5. Manuscript Title DNA sequence analysis and Jk blood group genotype-phenotype assessment							
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Section 2							
Section 2.	The Work Under C	onsideration for Pul	olication				
Did you or your institution <b>at any time</b> 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							
•	If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row.						
Excess rows can be removed by pressing the "X" button.							
Name of Institut	ion/Company	Grant? Personal Fees?	Non-Financial Support?	Other? Co	mments		
Shenzhen Municipal	Health Commission	<b>✓</b>		SZXK	(070		
Section 3.	Relevant financial	activities outside th	e submitted v	work.			
of compensation	n) with entities as descr	ibed in the instructions port relationships that v	. Use one line fo were <b>present d</b> u	r each entity;	elationships (regardless of amou add as many lines as you need months prior to publication.		
Are there any rel	evant conflicts of inter	est? ☐ Yes ✓ No	0				
Section 4.	ludelle de LB	Data de O.C.					
	Intellectual Prope	rty Patents & Copy	rights				
Do you have any	patents, whether plan	ned, pending or issued	, broadly relevar	nt to the work	? Yes ✓ No		

Xu 2



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