Date: November 30, 2021	
Your Name: Menghua Zhu	
Manuscript Title: Regression of hepatocellular carcinoma in a female cirrhotic patient	
Manuscript number (if known): DMR-21-90	

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The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial	planning of the work
1	All support for the present	√ None	
	manuscript (e.g., funding,		
	provision of study materials, medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from		38 11011115
2	any entity (if not indicated	√ None	
	in item #1 above).		
3	Royalties or licenses	√None	
5	Royallies of licenses	VINONE	
4	Consulting fees	√None	
-			
5	Payment or honoraria for	√None	

6	lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert	√ None
	testimony	
7	Support for attending meetings and/or travel	√ None
8	Patents planned, issued or pending	Vone
9	Participation on a Data Safety Monitoring Board or Advisory Board	√None
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	√None
11	Stock or stock options	√None
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	√ None
13	Other financial or non- financial interests	V None

I promise that I do not have any conflicts of relationships/activities/interests in the above items.

Please place an "X" next to the following statement to indicate your agreement:

Date: November 30, 2021	
Your Name: Hongyu Li	
Manuscript Title: Regression of hepatocellular carcinoma in a female cirrhotic patient	
Manuscript number (if known): DMR-21-90	

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	testimony	
7	Support for attending meetings and/or travel	√ None
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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	√None
11	Stock or stock options	√None
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	√ None
13	Other financial or non- financial interests	V None

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Please place an "X" next to the following statement to indicate your agreement:

Date: November 30, 2021	
Your Name: Huiying Yu	
Manuscript Title: Regression of hepatocellular carcinoma in a female cirrhotic patient	
Manuscript number (if known): DMR-21-90	

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5	Payment or honoraria for	√ None	

6	lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert	√ None
	testimony	
7	Support for attending meetings and/or travel	√ None
8	Patents planned, issued or pending	Vone
9	Participation on a Data Safety Monitoring Board or Advisory Board	√None
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11	Stock or stock options	√None
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	√ None
13	Other financial or non- financial interests	V None

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Please place an "X" next to the following statement to indicate your agreement:

Date: November 30, 2021
Your Name: Benqiang Yang
Manuscript Title: Regression of hepatocellular carcinoma in a female cirrhotic patient
Manuscript number (if known): DMR-21-90

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5	Payment or honoraria for	√ None	

6	lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert	√ None
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7	Support for attending meetings and/or travel	√ None
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9	Participation on a Data Safety Monitoring Board or Advisory Board	√None
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	√None
11	Stock or stock options	√None
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	√ None
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Please place an "X" next to the following statement to indicate your agreement:

Date: November 30, 2021	
Your Name: Danning Hou	
Manuscript Title: Regression of hepatocellular carcinoma in a female cirrhotic patient	
Manuscript number (if known): DMR-21-90	

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5	Payment or honoraria for	√ None	

6	lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert	√None
	testimony	
7	Support for attending meetings and/or travel	√ None
8	Patents planned, issued or pending	√ None
9	Participation on a Data Safety Monitoring Board or Advisory Board	√ None
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	√None
11	Stock or stock options	√None
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	√ None
13	Other financial or non- financial interests	V None

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Please place an "X" next to the following statement to indicate your agreement:

Date: November 30, 2021	
Your Name: Xingshun Qi	
Manuscript Title: Regression of hepatocellular carcinoma in a female cirrhotic patient	
Manuscript number (if known): DMR-21-90	

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7	Support for attending meetings and/or travel	√ None
8	Patents planned, issued or pending	√ None
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