Date:	2021.07.09
Your Name:	_Xuhong Zhang
Manuscript Title	e:_ Antitumor activity of everolimus in recurrent metastatic endometrial cancer with PTEN deletion: a
case report	
Manuscript num	nber (if known):

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Time frame: past	36 months
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3	Royalties or licenses	_ <b>X</b> None	
4	Consulting fees	_ <b>X</b> None	

5	Payment or honoraria for	_ <b>X</b> None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert	<b>X</b> None	
	testimony		
7	Support for attending meetings and/or travel	_ <b>X</b> None	
8	Patents planned, issued or	<b>X</b> None	
	pending		
9	Participation on a Data	<b>X</b> None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_ <b>X</b> None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
	·		
12	Receipt of equipment,	_ <b>X</b> None	
	materials, drugs, medical		
	writing, gifts or other		
42	services		
13	Other financial or non- financial interests	_ <b>X</b> None	
	inancial interests		
Plea	ase summarize the above co	nflict of interest in the foll	owing box:
N	lone.		

Date:	2021.07.09
Your Name:	Junping Shi
<b>Manuscript Title</b>	:_ Antitumor activity of everolimus in recurrent metastatic endometrial cancer with PTEN deletion: a
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3	Royalties or licenses	_ <b>X</b> None	
4	Consulting fees	_ <b>X</b> None	

5	Payment or honoraria for	_ <b>X</b> None		
	lectures, presentations,			
	speakers bureaus, manuscript writing or			
	educational events			
6	Payment for expert	<b>X</b> None		
	testimony			
7	Support for attending meetings and/or travel	_ <b>X</b> None		
8	Patents planned, issued or	<b>X</b> None		
	pending			
9	Participation on a Data	<b>X</b> None		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	OrigiMed Co. Ltd	Employee	
	in other board, society,			
	committee or advocacy group, paid or unpaid			
11	Stock or stock options	<b>X</b> None		
11	Stock of Stock options	_ <b>^</b> None		
12	Receipt of equipment,	<b>X</b> None		
	materials, drugs, medical	_ XNone		
	writing, gifts or other			
	services			
13	Other financial or non-	_ <b>X</b> None		
	financial interests			
<b>.</b> .		(II . ( ·		
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Date:	2021.07.09
Your Name:	Junying Li
<b>Manuscript Title</b>	:_ Antitumor activity of everolimus in recurrent metastatic endometrial cancer with PTEN deletion: a
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Manuscript num	ber (if known):

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	_ <b>X</b> None		
	lectures, presentations,			
	speakers bureaus, manuscript writing or			
	educational events			
6	Payment for expert	<b>X</b> None		
	testimony			
7	Support for attending meetings and/or travel	_ <b>X</b> None		
8	Patents planned, issued or	<b>X</b> None		
	pending			
9	Participation on a Data	<b>X</b> None		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	OrigiMed Co. Ltd	Employee	
	in other board, society,			
	committee or advocacy group, paid or unpaid			
11	Stock or stock options	<b>X</b> None		
11	Stock of Stock options	_ <b>^</b> None		
12	Receipt of equipment,	X None		
12	materials, drugs, medical	_ XNone		
	writing, gifts or other			
	services			
13	Other financial or non-	_ <b>X</b> None		
	financial interests			
<b>.</b> .				
Plea	Please summarize the above conflict of interest in the following box:			

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Date:	2021.07.09
Your Name:	Xiaoliang Shi
<b>Manuscript Title</b>	:_ Antitumor activity of everolimus in recurrent metastatic endometrial cancer with PTEN deletion: a
case report	
Manuscript num	ber (if known):

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3	Royalties or licenses	<b>X</b> None	
4	Consulting fees	<b>X</b> None	

5	Payment or honoraria for	_ <b>X</b> None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert testimony	<b>X</b> None	
	testimony		
7	Support for attending	<b>X</b> None	
,	meetings and/or travel	_ <b>X</b> None	
8	Patents planned, issued or	<b>X</b> None	
	pending		
9	Participation on a Data	<b>X</b> None	
	Safety Monitoring Board or		
	Advisory Board		
	Leadership or fiduciary role in other board, society,	OrigiMed Co. Ltd	Employee
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11	Stock or stock options	_ <b>X</b> None	
12	Receipt of equipment,	_ <b>X</b> None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	_ <b>X</b> None	
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		Time frame: past	36 months
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3	Royalties or licenses	XNone	
4	Consulting fees	<b>X</b> None	

5	Payment or honoraria for lectures, presentations,	_ <b>X</b> None		
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert testimony	_ <b>X</b> None		
	testimony			
7	Support for attending	<b>X</b> None		
,	meetings and/or travel	_ XNone		
	-			
8	Patents planned, issued or	<b>X</b> None		
	pending			
9	Participation on a Data Safety Monitoring Board or	<b>X</b> None		
	Advisory Board			
10	Leadership or fiduciary role	OrigiMed Co. Ltd	Employee	
	in other board, society,			
	committee or advocacy			
	group, paid or unpaid			
11	Stock or stock options	_ <b>X</b> None		
40				
12	Receipt of equipment,	_ <b>X</b> None		
	materials, drugs, medical writing, gifts or other			
	services			
13	Other financial or non-	<b>X</b> None		
	financial interests			
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Date:	2021.07.09
Your Name:	Yingli Zhang
<b>Manuscript Title</b>	:_ Antitumor activity of everolimus in recurrent metastatic endometrial cancer with PTEN deletion: a
case report	
Manuscript num	ber (if known):

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3	Royalties or licenses	XNone	
4	Consulting fees	<b>X</b> None	

5	Payment or honoraria for	_ <b>X</b> None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert	<b>X</b> None	
	testimony		
7	Support for attending meetings and/or travel	_ <b>X</b> None	
8	Patents planned, issued or	<b>X</b> None	
	pending		
9	Participation on a Data	<b>X</b> None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_ <b>X</b> None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
	·		
12	Receipt of equipment,	_ <b>X</b> None	
	materials, drugs, medical		
	writing, gifts or other		
42	services		
13	Other financial or non- financial interests	_ <b>X</b> None	
	inancial interests		
Plea	ase summarize the above co	nflict of interest in the foll	owing box:
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Date:	2021.07.09
Your Name:	Yanzhi Cui
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2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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