Date: _March19,2022	
Your Name: Fan Deng	
Manuscript Title: Abnormal neutrophil polarization in chronic obstructive pulmonary disease and how cigarette sm	<u>10ke</u>
extracts attract neutrophils	
Manuscript number (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.

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

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		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
			planning of the work
1	All support for the present	XNone	
	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	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	XNone			
	testimony				
7	Support for attending meetings and/or travel	XNone			
8	Patents planned, issued or pending	XNone			
9	Participation on a Data	XNone			
	Safety Monitoring Board or				
	Advisory Board				
10	Leadership or fiduciary role	XNone			
	in other board, society,				
	committee or advocacy				
11	group, paid or unpaid	V None			
11	Stock or stock options	XNone			
12	Receipt of equipment,	X None			
12	materials, drugs, medical				
	writing, gifts or other				
	services				
13	Other financial or non-	X None			
	financial interests				
Plea	ise summarize the above co	nflict of interest in the fol	lowing box:		
N	lone				
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Plea	Please place an "X" next to the following statement to indicate your agreement:				

Date: _March18,2022	
Your Name:Shaobo Zhong	
Manuscript Title: Abnormal neutrophil polarization in chronic obstructive pulmonary disease and how of	igarette smoke
extracts attract neutrophils	
Manuscript number (if known):	

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	XNone			
	testimony				
7	Support for attending meetings and/or travel	XNone			
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8	Patents planned, issued or pending	XNone			
9	Participation on a Data	XNone			
	Safety Monitoring Board or				
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10	Leadership or fiduciary role	XNone			
	in other board, society, committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	X None			
	Stock of Stock options				
12	Receipt of equipment,	X None			
	materials, drugs, medical				
	writing, gifts or other				
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13	Other financial or non-	XNone			
	financial interests				
Plea	ise summarize the above co	nflict of interest in the fo	lowing box:		
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Plea	Please place an "X" next to the following statement to indicate your agreement:				

Date: _March17,2022	
Your Name: Changhui Yu	
Manuscript Title: Abnormal neutrophil polarization in chronic obstructive pulmonary disease and how	cigarette smoke
extracts attract neutrophils	
Manuscript number (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: Since the initial	planning of the work
1	All support for the present	XNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article processing charges, etc.)		
	No time limit for this item.		
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		Time frame: past	36 months
2	Grants or contracts from	X None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	X None	
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7	Support for attending meetings and/or travel	XNone	
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8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
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12	Receipt of equipment,	XNone	
	materials, drugs, medical		
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	financial interests		
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Plea	se summarize the above co	nflict of interest in the foll	owing box:
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Plea	se place an "X" next to the	tollowing statement to inc	licate vour agreement:

Date: _March19,2022	
Your Name: Haijin Zhao	
Manuscript Title: Abnormal neutrophil polarization in chronic obstructive pulmonary disease and how	cigarette smoke
extracts attract neutrophils	
Manuscript number (if known):	

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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	Payment or honoraria for	XNone			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	XNone			
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7	Support for attending meetings and/or travel	XNone			
8	Patents planned, issued or pending	XNone			
9	Participation on a Data	XNone			
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10	Leadership or fiduciary role	X None			
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	committee or advocacy				
	group, paid or unpaid				
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12	Receipt of equipment,	XNone			
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	services				
13	Other financial or non-	XNone			
	financial interests				
Plea	se summarize the above co	nflict of interest in the fol	lowing box:		
N	lone				
Plea	Please place an "X" next to the following statement to indicate your agreement:				

Date: _March18,2022	
Your Name: Hui Huang	
Manuscript Title: Abnormal neutrophil polarization in chronic obstructive pulmonary disease and how	ı cigarette smoke
extracts attract neutrophils	
Manuscript number (if known):	

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4	Consulting fees	XNone	

5	Payment or honoraria for	XNone			
	lectures, presentations,				
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	manuscript writing or				
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6	Payment for expert	XNone			
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7	Support for attending meetings and/or travel	XNone			
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8	Patents planned, issued or pending	X_None			
9	Participation on a Data	XNone			
	Safety Monitoring Board or				
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10	Leadership or fiduciary role	XNone			
	in other board, society, committee or advocacy				
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11	Stock or stock options	X None			
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12	Receipt of equipment,	X None			
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13	Other financial or non-	XNone			
	financial interests				
Plea	ise summarize the above co	nflict of interest in the fo	lowing box:		
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' '					
Plea	Please place an "X" next to the following statement to indicate your agreement:				

Date: _March18,2022	
Your Name:Xiaojing Meng	
Manuscript Title: Abnormal neutrophil polarization in chronic obstructive pulmonary disease and how of	igarette smoke
extracts attract neutrophils	
Manuscript number (if known):	

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4	Consulting fees	XNone	

5	Payment or honoraria for	XNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	XNone		
	testimony			
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or	XNone		
	pending			
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9	Participation on a Data	XNone		
	Safety Monitoring Board or Advisory Board			
10	Leadership or fiduciary role	V None		
10	in other board, society,	XNone		
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12	Receipt of equipment,	X None		
	materials, drugs, medical			
	writing, gifts or other			
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13	Other financial or non-	XNone		
	financial interests			
Plea	ise summarize the above co	nflict of interest in the fo	llowing box:	
N	one			
Plea	Please place an "X" next to the following statement to indicate your agreement:			

Date: _March19,2022	
Your Name: Changqin Lin	
Manuscript Title: Abnormal neutrophil polarization in chronic obstructive pulmonary disease and how	<u>cigarette smoke</u>
extracts attract neutrophils	
Manuscript number (if known):	

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5	Payment or honoraria for	XNone			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
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8	Patents planned, issued or	XNone			
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9	Participation on a Data	XNone			
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Plea	Please place an "X" next to the following statement to indicate your agreement:				

Date: _March18,2022
Your Name:Shaoxi Cai
Manuscript Title: Abnormal neutrophil polarization in chronic obstructive pulmonary disease and how cigarette smoke
extracts attract neutrophils
Manuscript number (if known):

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

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

_X__ I certify that I have answered every question and have not altered the wording of any of the questions on this