Date: August 15 th , 20	22
Your Name: Yan Zh	u

Manuscript Title: Peripheral White Blood cell subtypes and the Development/Progression of DME in Type 2

Diabetic Patients: a case-control study

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: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

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

None.		

Date: August 15 th , 2022	
Your Name: Mudong Xu	

Manuscript Title: Peripheral White Blood cell subtypes and the Development/Progression of DME in Type 2

Diabetic Patients: a case-control study

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6	Payment for expert	None	
	testimony		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
Ple	ase summarize the above co	onflict of interest in the fo	lowing box:
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	None.		

Date:	Augus	st 15 th ,	202	22
Your	Name:	Junn	an	Li

Manuscript Title: Peripheral White Blood cell subtypes and the Development/Progression of DME in Type 2

Diabetic Patients: a case-control study

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3	Royalties or licenses	None	
4	Consulting fees	None	

5	lectures, presentations,	None	
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6	Payment for expert	None	
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7	Support for attending meetings and/or travel	None	
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8	Patents planned, issued or	None	
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9	Participation on a Data	None	
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10	Leadership or fiduciary role	None	
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	committee or advocacy		
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11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
	ease summarize the above co	onflict of interest in the fo	lowing box:

Date: August 15 th , 202	2
Your Name: Junjie Li	

Manuscript Title: Peripheral White Blood cell subtypes and the Development/Progression of DME in Type 2

Diabetic Patients: a case-control study

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	processing charges, etc.) No time limit for this item.		
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		Time frame: past	36 months
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	in item #1 above).		
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4	Consulting fees	None	

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

Date: August 15 th , 2022	<u>)</u>
Your Name: Lele Li	

Manuscript Title: Peripheral White Blood cell subtypes and the Development/Progression of DME in Type 2

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10	Leadership or fiduciary role in other board, society,	None	
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	writing, gifts or other services		
13	Other financial or non-	None	
13	financial interests	None	
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Ple	ease summarize the above o	onflict of interest in the fo	lowing box:
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None.

Date: A	lugus	t 15 th	, 2022
Your N	ame:	Yue	Zhou

Manuscript Title: Peripheral White Blood cell subtypes and the Development/Progression of DME in Type 2

Diabetic Patients: a case-control study

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	meetings and/or traver		
8	Patents planned, issued or	None	
	pending		
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	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
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	committee or advocacy		
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11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
Г	ase summarize the above co	onflict of interest in the fo	llowing box:

Date: August 15 th , 2022	
Your Name: Yu Song	

Manuscript Title: Peripheral White Blood cell subtypes and the Development/Progression of DME in Type 2

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4	Consulting fees	None	

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	iterials, drugs, medical iting, gifts or other	None				
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	aterials, drugs, medical iting, gifts or other rvices					
Please summarize the above conflict of interest in the following box: None.						

Date: August 15 th , 2022	2
Your Name: Qi Cai	

Manuscript Title: Peripheral White Blood cell subtypes and the Development/Progression of DME in Type 2

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