Date: 04/05/2021
Your Name: YAHYA ALWATARI
Manuscript Title: ENDOSCOPIC RESECTION TECHNIQUES OF BENIGN ESOPHAGEAL TUMORS
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</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	<u> </u>	
	any entity (if not indicated	•	
	in item #1 above).		
3	Royalties or licenses	<u> </u>	
4	Consulting fees	<u> </u>	

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

None.

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

Date: 04/05/2021	
Your Name: DAWIT AYALEW	
Manuscript Title: ENDOSCOPIC RESECTION TECHNIQUES OF BENIGN ESOPHAGEAL TUMORS	
Manuscript number (if known):	

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2	Grants or contracts from	None	
	any entity (if not indicated	•	
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3	Royalties or licenses	<u>V</u> None	
4	Consulting fees	<u> </u>	

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

None.

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

Date: 04/05/2021
Your Name: ATHANASIOS E SEVDALIS
Manuscript Title: ENDOSCOPIC RESECTION TECHNIQUES OF BENIGN ESOPHAGEAL TUMORS
Manuscript number (if known):

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4	Consulting fees	<u> </u>	

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

None.

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

Date: 04/05/2021
Your Name: DANIEL SCHEESE
Manuscript Title: ENDOSCOPIC RESECTION TECHNIQUES OF BENIGN ESOPHAGEAL TUMORS
Manuscript number (if known):

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4	Consulting fees	<u> </u>	

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

None.

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

Date: 04/05/2021
Your Name: VIGNESH VUDATHA
Manuscript Title: ENDOSCOPIC RESECTION TECHNIQUES OF BENIGN ESOPHAGEAL TUMORS
Manuscript number (if known):

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3	Royalties or licenses	<u> </u>	
4	Consulting fees	<u> </u>	

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

None.

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

Date: 04/05/2021
Your Name: WALKER JULLIARD
Manuscript Title: ENDOSCOPIC RESECTION TECHNIQUES OF BENIGN ESOPHAGEAL TUMORS
Manuscript number (if known):

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	in item #1 above).		
3	Royalties or licenses	<u> </u>	
4	Consulting fees	<u> </u>	

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

None.

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

Date: 04/05/2021	
Your Name: RACHIT SHAH	_
Manuscript Title: ENDOSCOPIC RESECTION TECHNIQUES OF BENIGN ESOPHAGEAL TUMORS	_
Manuscript number (if known):	_

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	in item #1 above).		
3	Royalties or licenses	<u> </u>	
4	Consulting fees	<u> </u>	

5	Payment or honoraria for lectures, presentations,	None
	speakers bureaus, manuscript writing or educational events	
6	Payment for expert	
	testimony	
7	Support for attending meetings and/or travel	None
8	Patents planned, issued or	<u>V</u> None
	pending	
9	Participation on a Data	V None
	Safety Monitoring Board or	
	Advisory Board	
10	Leadership or fiduciary role	
	in other board, society, committee or advocacy	
	group, paid or unpaid	
11	Stock or stock options	None
12	Descipt of emission	V None
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