Date:Jun. 21 th ,2021			
Your Name:Yongchun Zhang			
Manuscript Title:The efficacy and safety of different radiotherapy doses in neoadjuvant			
chemoradiotherapy for locally advanced rectal cancer			
Manuscript number (if known):			

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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 manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	XNone	
		Time frame: past	36 months
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				
	presentations, bureaus,				
	ipt writing or				
	nal events				
6 Payment	for expert	XNone			
testimon	ıy				
	for attending s and/or travel	XNone			
meeting.	s and/or traver				
8 Patents	olanned, issued or	X None			
pending	,				
	tion on a Data	XNone			
	lonitoring Board or				
Advisory		V. Nana			
	Leadership or fiduciary role in other board, society,	XNone			
	ee or advocacy				
	aid or unpaid				
11 Stock or	Stock or stock options	XNone			
12 Paraint	. Constitution and	V. Name			
	Receipt of equipment, materials, drugs, medical writing, gifts or other	XNone			
services	5				
13 Other fin	Other financial or non- financial interests	XNone			
financial					
Please sum	Please summarize the above conflict of interest in the following box:				
NO					

Date:_Jun. 21 th ,2021	
Your Name: Peng Jiang	
Manuscript Title:The efficacy and safety of different radiotherapy doses in neoadjuvant	
chemoradiotherapy for locally advanced rectal cancer	
Manuscript number (if known):	

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	5 Payment or honoraria for lectures, presentations,	X None		
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	XNone		
	testimony			
	,			
7	Support for attending	XNone		
	meetings and/or travel			
8	Patents planned, issued or	X None		
-	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	XNone		
12	Receipt of equipment,	XNone		
	materials, drugs, medical			
	writing, gifts or other			
12	Services Other financial or non	V None		
13	Other financial or non- financial interests	XNone		
	ililanciai interests			
Ple	Please summarize the above conflict of interest in the following box:			
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	NO			

Date:_Jun. 21 th ,2021	
Your Name: Hui Zhu	
Manuscript Title:The efficacy and safety of different radiotherapy doses in neoadjuvant	
chemoradiotherapy for locally advanced rectal cancer	
Manuscript number (if known):	

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

		T			
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	XNone			
	meetings and/or travel				
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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	XNone			
	in other board, society,				
	committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	XNone			
12	Receipt of equipment,	XNone			
	materials, drugs, medical				
	writing, gifts or other				
	services				
13	Other financial or non-	X None			
	financial interests				
Ple	Please summarize the above conflict of interest in the following box:				
	and sammanize the above t				
	NO				
	NO				

Date:_Jun.	
21 th ,2021	
Your Name:Bin Dong	_
Manuscript Title:The efficacy and safety of different radiotherapy doses in neoadjuvant	
chemoradiotherapy for locally advanced rectal cancer	
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	X None	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
10	Advisory Board	V. Name	
10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	X None	
	financial interests		
Ple	ase summarize the above c	onflict of interest in the fo	llowing box:
	NO.		
	NO		

Date:Jun. 21 th ,2021	
Your Name:Hanxiao Zhai	
Manuscript Title:The efficacy and safety of different radiotherapy doses in neoadjuvant	
chemoradiotherapy for locally advanced rectal cancer	
Manuscript number (if known):	

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	speakers bureaus,			
	manuscript writing or			
	educational events			
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	testimony			
7	Support for attending	XNone		
	meetings and/or travel			
8	Patents planned, issued or	X None		
5	pending			
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9	Participation on a Data	X None		
,	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	X None		
10	in other board, society, committee or advocacy	^_NOTIE		
	group, paid or unpaid			
11	Stock or stock options	X None		
11	otock of stock options			
12	Receipt of equipment,	X None		
12	materials, drugs, medical			
	writing, gifts or other			
	services			
13	Other financial or non-	X None		
13	financial interests			
Dla	ase summarize the above of	onflict of interest in the fo	llowing hov:	
rie	Please summarize the above conflict of interest in the following box:			

NO			

Date:_Jun. 21 th ,2021	
Your Name:Zhiying Chen	_
Manuscript Title:The efficacy and safety of different radiotherapy doses in neoadjuvant	
chemoradiotherapy for locally advanced rectal	
cancer	
Manuscript number (if known):	

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	educational events	V N			
6	Payment for expert	XNone			
	testimony				
7	Support for attending	XNone			
,	meetings and/or travel	XNone			
	meetings and, or traver				
8	Patents planned, issued or	X None			
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	services				
13	Other financial or non-	XNone			
	financial interests				
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	NO.				
	NO				