		ICMJE DISC	CLOSURE FORM	
Date:	Dec.10 th , 2021			
Your Nam	e: Yuan C	iao		
Manuscri	ot Title: A three-phas	e trans-ethnic study reve	als B7-H3 expression is a significant and independen	t biomarke
associated	d with colon cancer o	verall survival		
Manuscri	ot number (if known):		
related to parties wi to transpa	the content of your nose interests may b arency and does not	manuscript. "Related" me e affected by the content	Il relationships/activities/interests listed below that eans any relation with for-profit or not-for-profit thin of the manuscript. Disclosure represents a commitm . If you are in doubt about whether to list a o so.	^r d
The follow		to the author's relationsh	ips/activities/interests as they relate to the <u>current</u>	
to the epi	demiology of hypert		e <u>defined broadly</u> . For example, if your manuscript p e all relationships with manufacturers of antihyperto the manuscript.	
	•	pport for the work report s the past 36 months.	ed in this manuscript without time limit. For all othe	er items,
		Name all entities with	Specifications/Comments	
		whom you have this	(e.g., if payments were made to you or to your	
		relationship or indicate	institution)	
		none (add rows as	,	
		needed)		
		Time frame: Since the initia	al planning of the work	
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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	

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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					
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	XNone				
12	Receipt of equipment,	XNone				
	materials, drugs, medical					
	writing, gifts or other					
	services					
13	Other financial or non-	XNone				
	financial interests					
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		ICMJE DISCLO	OSURE FORM	
Date	e: Dec.10 th . 2021			
	r Name: Yu Xu			
			Ils B7-H3 expression is a significant and independent	_ biomarker
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	following questions apply uscript only.	to the author's relationsh	ips/activities/interests as they relate to the <u>current</u>	
to th		ension, you should declare	defined broadly. For example, if your manuscript per all relationships with manufacturers of antihypertent the manuscript.	
	em #1 below, report all su time frame for disclosure i	• •	ed in this manuscript without time limit. For all othe	r items,
		Name all entities with	Specifications/Comments	
		whom you have this	(e.g., if payments were made to you or to your	
		relationship or indicate	institution)	
		none (add rows as		
		needed)		
		Time frame: Since the initia	il planning of the work	<u> </u>
	All support for the present	XNone		_
	manuscript (e.g., funding, provision of study materials,			=
	medical writing, article			\dashv
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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	V. Nama				
6	Payment for expert testimony	XNone				
	testimony					
7	Support for attending	XNone				
	meetings and/or travel					
8	Patents planned, issued or	XNone				
	pending					
9	Participation on a Data	XNone				
	Safety Monitoring Board or					
10	Advisory Board	V. None				
10	Leadership or fiduciary role in other board, society,	XNone				
	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:					
Г	None					
	None					

ICMJE DISCLOSURE FORM

Date:	Dec.10 th , 2021	
Your Name:	Meiqin Gao	
•	tle: A three-phase trans-ethnic study reveals B7-H3 expression is a significant and indep th colon cancer overall survival	
Manuscript nu	umber (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>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		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	

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5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	XNone	
	testimony		
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7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	X None	
,	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
44	group, paid or unpaid	V N	
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
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			ICMJE DISC	LOSURE FORM					
Date	e:	_Dec.10 th , 2021							
You	r Name:	Aimin	Huang						
Mar	nuscript T	itle: A three-phas	e trans-ethnic study revea	Is B7-H3 expression is a significant and independent bid	marker				
asso	ciated w	ith colon cancer o	verall survival						
Mar	nuscript n	umber (if known)	:						
rela part to ti	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.								
	following		to the author's relationshi	ps/activities/interests as they relate to the current					
to tl	he epiden	niology of hyperte		defined broadly. For example, if your manuscript pertar all relationships with manufacturers of antihypertensi the manuscript.					
			pport for the work reporte s the past 36 months.	ed in this manuscript without time limit. For all other it	ems,				
			Name all entities with	Specifications/Comments					
			whom you have this	(e.g., if payments were made to you or to your					
			relationship or indicate	institution)					
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			needed) Time frame: Since the initia	Inlanning of the work					
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		relationship or indicate none (add rows as needed)	institution)
		Time frame: Since the initial	planning of the work
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8	Patents planned, issued or	XNone				
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9	Participation on a Data	XNone				
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	services					
13	Other financial or non-	XNone				
	financial interests					
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ICMJE DISCLOSURE FORM							
Dat	te:Dec.10 th , 2021_						
Υοι	ur Name: Pan C	hi					
Ma ass	nuscript Title: A three-pha ociated with colon cancer	se trans-ethnic study reveal overall survival	Is B7-H3 expression is a significant and independent bion	narker			
relato to trela	ated to the content of your ties whose interests may be transparency and does not ationship/activity/interest	manuscript. "Related" mea be affected by the content o necessarily indicate a bias. , it is preferable that you do	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment of you are in doubt about whether to list a so. ps/activities/interests as they relate to the current				
to t me In i	the epidemiology of hyper dication, even if that medi	tension, you should declare cation is not mentioned in tapport for the work reporte	defined broadly. For example, if your manuscript pertain all relationships with manufacturers of antihypertensive the manuscript. d in this manuscript without time limit. For all other iten	!			
		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)				
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L	All support for the present manuscript (e.g., funding, provision of study materials,	XNone					

		none (add rows as needed)	Institution)				
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3	Royalties or licenses	XNone					
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	lectures, presentations,					
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	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	X None				
O	pending	XNone				
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9	Participation on a Data	X None				
,	Safety Monitoring Board or	X_None				
	Advisory Board					
10	Leadership or fiduciary role in other board, society,	X None				
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	committee or advocacy					
	group, paid or unpaid					
11	Stock or stock options	X None				
12	Receipt of equipment, materials, drugs, medical	X None				
	writing, gifts or other					
	services					
13	Other financial or non-	X None				
	financial interests					
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	None					