Date:_____May. 20th, 2023____ Your Name:____Bora Lee___ Manuscript Title:____ Value of cardiopulmonary exercise testing in the assessment of symptoms and quality of life in Asian patients with chronic obstructive pulmonary disease ____ Manuscript number (if known):__ JTD-23-185-R2__

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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)
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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).	X_None	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or	XNone	
	educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	X_None	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or	XNone	
	Advisory Board		
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, materials, drugs, medical writing, gifts or other	X_None	
	services		
13	Other financial or non-	XNone	
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None.

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Date:_____May. 20th, 2023____ Your Name:____ Yeon-Mok Oh ___ Manuscript Title:____ Value of cardiopulmonary exercise testing in the assessment of symptoms and quality of life in Asian patients with chronic obstructive pulmonary disease ____ Manuscript number (if known):__ JTD-23-185-R2__

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11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other	X_None	
	services		
13	Other financial or non-	XNone	
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