

ICMJE DISCLOSURE FORM

Date: 2023/05/17
 Your Name: Tong Lu
 Manuscript Title: Bioinformatics Analysis and Single-cell RNA Sequencing: Elucidating the Ubiquitination Pathways and Key Enzymes in Lung Adenocarcinoma
 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 current manuscript only.

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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.	<input checked="" type="checkbox"/> None	
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> None	
3	Royalties or licenses	<input checked="" type="checkbox"/> None	
4	Consulting fees	<input checked="" type="checkbox"/> None	

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

Please summarize the above conflict of interest in the following box:

None

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

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 2023/05/17

Your Name: Ran Xu

Manuscript Title: Bioinformatics Analysis and Single-cell RNA Sequencing: Elucidating the Ubiquitination Pathways and Key Enzymes in Lung Adenocarcinoma

Manuscript number (if known): _____

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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ICMJE DISCLOSURE FORM

Date: 2023/05/17
 Your Name: Chenghao Wang
 Manuscript Title: Bioinformatics Analysis and Single-cell RNA Sequencing: Elucidating the Ubiquitination Pathways and Key Enzymes in Lung Adenocarcinoma
 Manuscript number (if known): _____

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7	Support for attending meetings and/or travel	<u> </u> <u>X</u> <u> </u> None	
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11	Stock or stock options	<u> </u> <u>X</u> <u> </u> None	
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None

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X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 2023/05/17

Your Name: Xiang Zhou

Manuscript Title: Bioinformatics Analysis and Single-cell RNA Sequencing: Elucidating the Ubiquitination Pathways and Key Enzymes in Lung Adenocarcinoma

Manuscript number (if known): _____

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4	Consulting fees	<u> X </u> None	

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6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
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11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please summarize the above conflict of interest in the following box:

None

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

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 8- may-2023

Your Name: **RAFAEL PARRA MEDINA**

Manuscript Title: **Bioinformatics Analysis and Single-cell RNA Sequencing: Elucidating the Ubiquitination Pathways and Key Enzymes in Lung Adenocarcinoma**

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 lectures, presentations, speakers bureaus, manuscript writing or educational events	AstraZeneca, Amgen, Bayer, Merck Sharp and Dohme, Pfizer	Lectures
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	Amgen	Travel to ESMO 2022
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-financial interests	None	

Please summarize the above conflict of interest in the following box:

Dr. Parra-Medina has received lectures fees for AstraZeneca, Amgen, Bayer, Merck Sharp and Dohme, Pfizer, and support for attending meeting "ESMO 2022" from Amgen.

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

X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 2023/5/11
 Your Name: Roberto Díaz-Peña
 Manuscript Title: Bioinformatics Analysis and Single-cell RNA Sequencing: Elucidating the Ubiquitination Pathways and Key Enzymes in Lung Adenocarcinoma
 Manuscript number (if known): _____

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6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
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ICMJE DISCLOSURE FORM

Date: 2023/05/17

Your Name: Bo Peng

Manuscript Title: Bioinformatics Analysis and Single-cell RNA Sequencing: Elucidating the Ubiquitination Pathways and Key Enzymes in Lung Adenocarcinoma

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Date: 2023/05/17

Your Name: Linyou Zhang

Manuscript Title: Bioinformatics Analysis and Single-cell RNA Sequencing: Elucidating the Ubiquitination Pathways and Key Enzymes in Lung Adenocarcinoma

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