Date: Aug. 30<sup>th</sup>, 2023 Your Name: Bin Li Manuscript Title: Pattern of tumor regression after neoadjuvant chemoimmunotherapy for esophageal squamous cell carcinoma 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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		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.) <b>No time limit for this item.</b>	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	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events	X None	
0	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
,	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	Descipt of aquinment	X None	
12	Receipt of equipment, materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
15	financial interests		

None.

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

Date: Aug. 30<sup>th</sup>, 2023 Your Name: Yichen Wang Manuscript Title: Pattern of tumor regression after neoadjuvant chemoimmunotherapy for esophageal squamous cell carcinoma Manuscript number (if known):

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5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events	X None	
0	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
,	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	Descipt of aquinment	X None	
12	Receipt of equipment, materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
15	financial interests		

None.

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

Date: Aug. 30<sup>th</sup>, 2023 Your Name: Hui Yu Manuscript Title: Pattern of tumor regression after neoadjuvant chemoimmunotherapy for esophageal squamous cell carcinoma 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		
6	educational events	X None	
0	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
,	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	Descipt of aquinment	X None	
12	Receipt of equipment, materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
15	financial interests		

None.

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

Date: Aug. 30<sup>th</sup>, 2023 Your Name: Haiqing Chen Manuscript Title: Pattern of tumor regression after neoadjuvant chemoimmunotherapy for esophageal squamous cell carcinoma 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		
6	educational events	X None	
0	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
,	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	Descipt of aquinment	X None	
12	Receipt of equipment, materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
15	financial interests		

None.

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

Date: Aug. 30<sup>th</sup>, 2023 Your Name: Yihua Sun Manuscript Title: Pattern of tumor regression after neoadjuvant chemoimmunotherapy for esophageal squamous cell carcinoma 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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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events	X None	
0	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
,	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	Descipt of aquinment	X None	
12	Receipt of equipment, materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
15	financial interests		

None.

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

Date: Aug. 30<sup>th</sup>, 2023 Your Name: Hong Hu Manuscript Title: Pattern of tumor regression after neoadjuvant chemoimmunotherapy for esophageal squamous cell carcinoma 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
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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		
6	educational events	X None	
0	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
,	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	Descipt of aquinment	X None	
12	Receipt of equipment, materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
15	financial interests		

None.

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

Date: Aug. 30<sup>th</sup>, 2023 Your Name: Yawei Zhang Manuscript Title: Pattern of tumor regression after neoadjuvant chemoimmunotherapy for esophageal squamous cell carcinoma 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		
6	educational events Payment for expert	V. Nana	
6	testimony	XNone	
7	Support for attending	X None	
,	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	Descipt of on viewant	V. Nono	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
12		V Nego	
13	Other financial or non- financial interests	XNone	

None.

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

Date: Aug. 30<sup>th</sup>, 2023 Your Name: Jiaqing Xiang Manuscript Title: Pattern of tumor regression after neoadjuvant chemoimmunotherapy for esophageal squamous cell carcinoma Manuscript number (if known):

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5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	V. Nana	
6	testimony	XNone	
7	Support for attending	X None	
,	meetings and/or travel		
8	Patents planned, issued or	XNone	
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	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
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11	Stock or stock options	XNone	
12	Descipt of any imment	V. Nono	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
12		V. Nene	
13	Other financial or non- financial interests	XNone	

None.

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

Date: Aug. 30<sup>th</sup>, 2023 Your Name: Yuan Li Manuscript Title: Pattern of tumor regression after neoadjuvant chemoimmunotherapy for esophageal squamous cell carcinoma 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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6	testimony	XNone	
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12	Descipt of any imment	V. Nono	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
12		V. Nene	
13	Other financial or non- financial interests	XNone	

None.

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

Date: Aug. 30<sup>th</sup>, 2023 Your Name: Haiquan Chen Manuscript Title: Pattern of tumor regression after neoadjuvant chemoimmunotherapy for esophageal squamous cell carcinoma Manuscript number (if known):

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	manuscript writing or		
6	educational events Payment for expert	V. Nana	
6	testimony	XNone	
7	Support for attending	X None	
,	meetings and/or travel		
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12	Descipt of any imment	V. Nono	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
12		V Nego	
13	Other financial or non- financial interests	XNone	

None.

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