Date: Aug. 1	4 <sup>th</sup> , 2023
Your Name: Xu	e-yan Zheng
Manuscript Title:	Effects of occupational exposure to dust, gas, vapor and fumes on chronic bronchitis and lung
<u>function</u>	
Manuscript numb	er (if known): JTD-23-646

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</u> <u>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.

		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.	Guangdong provincial medical science and technology research funding (C2021083) Science and Technology Foundation of Guangdong Province (2023A1515012328)	This work was supported by Science and Technology Foundation of Guangdong Province (2023A1515012328, RMB 100,000).
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	XNone	

	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		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
	<b>3</b>		
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,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

The author reports funding from Guangdong provincial medical science and technology research funding (C2021083); and Science and Technology Foundation of Guangdong Province (2023A1515012328).

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

Date: Aug. 14th,	2023
Your Name: Yi-Ji	n Zheng
Manuscript Title:	Effects of occupational exposure to dust, gas, vapor and fumes on chronic bronchitis and lung
function	
Manuscript number	if known): JTD-23-646

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		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		
	educational events	V Name	
6	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	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
DI.		and the state of the state of the state of	C. H

None declared.	

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.

Date:	Aug. 14 <sup>th</sup> , 2023	
Your Name	:Ting-ting Liao_	_
Manuscrip	t Title:Effects of	ccupational exposure to dust, gas, vapor and fumes on chronic bronchitis and lung
function	_	
Manuscrip	t number (if known):_	JTD-23-646

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		Time frame: Since the initial	planning of the work
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		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		
_	educational events		
6	Payment for expert	XNone	
	testimony		
	-		
7	Support for attending meetings and/or travel	XNone	
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,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	X None	
	financial interests		
			•

None declared.	

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.

Date: Aug. 14th	2023
Your Name: Yan-	Jun Xu
Manuscript Title:	Effects of occupational exposure to dust, gas, vapor and fumes on chronic bronchitis and lung
function	
Manuscript number	(if known): JTD-23-646

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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.	Guangdong provincial medical science and technology research funding (C2021083)  Science and Technology Foundation of Guangdong Province (2023A1515012328)	This work was supported by Science and Technology Foundation of Guangdong Province (2023A1515012328, RMB 100,000).
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	XNone	

	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		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
	<b>3</b>		
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,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

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

Date:Aug. 14 <sup>th</sup> , 2023		
Your Name: <u>Li Liu</u>		
Manuscript Title: Effects of occu	ational exposure to dust, gas, vapor and fumes on chronic bronchitis and lung	
<u>function</u>		
Manuscript number (if known):	JTD-23-646	

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		Time frame: Since the initia	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	X_None	
4	Consulting fees	X None	

5	Payment or honoraria for	X_None	
	lectures, presentations,		
	speakers bureaus, 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	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	X None	
	Stock of Stock options		
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	X None	
13	financial interests		
	inianciai interests		
			•

None declared.	

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.

Date:Aug. 14	<sup>th</sup> , 2023
Your Name: Ye	Wang
Manuscript Title:	Effects of occupational exposure to dust, gas, vapor and fumes on chronic bronchitis and lung
function	
Manuscript numbe	r (if known):JTD-23-646

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2	Grants or contracts from any entity (if not indicated	XNone	

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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	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
	<b>3</b>		
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,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

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

Date: Aug. 1	4 <sup>th</sup> , 2023
Your Name: N	Xiao
Manuscript Title:_	Effects of occupational exposure to dust, gas, vapor and fumes on chronic bronchitis and lung
function	
Manuscript numb	er (if known): ITD-23-646

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	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		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
	<b>3</b>		
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,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

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Date: Au	g. 14 <sup>th</sup> , 2023
Your Name:	Chuan Li
Manuscript Ti	tle:Effects of occupational exposure to dust, gas, vapor and fumes on chronic bronchitis and lung
function	
Manuscrint nu	imber (if known): ITD-23-646

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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 meetings and/or travel	XNone	
	<b>3</b>		
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,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

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Date: Aug. 14 <sup>th</sup> , 2023	<u></u>
Your Name: Zhao-Xuan H	<u>e</u>
Manuscript Title: Effects	of occupational exposure to dust, gas, vapor and fumes on chronic bronchitis and lung
function	
Manuscript number (if know	n): JTD-23-646

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2	Grants or contracts from any entity (if not indicated	XNone	

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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	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
	<b>3</b>		
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,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

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Date:	Aug. 14 <sup>th</sup> ,	2023						
Your Nam	e:Xiao-	min Tan						
Manuscri	pt Title:	Effects of oc	cupational exposure to	dust, gas,	vapor and	fumes on c	hronic bron	chitis and lung
function_								
Manuscrii	ot number (	if known):	JTD-23-646					

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		Time frame: Since the initial	planning of the work
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		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	X_None	
	lectures, presentations,		
	speakers bureaus, 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	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	X None	
11	Stock of Stock options		
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

None declared.	

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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.

Date:Aug. 14 <sup>th</sup> , 20	<u>)23</u>
Your Name: Rui-Lin	Meng
Manuscript Title:E	ffects of occupational exposure to dust, gas, vapor and fumes on chronic bronchitis and lung
function	
Manuscript number (if	known): JTD-23-646

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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.	Guangdong provincial medical science and technology research funding (C2021083) Science and Technology Foundation of Guangdong Province (2023A1515012328)	This work was supported by Science and Technology Foundation of Guangdong Province (2023A1515012328, RMB 100,000).
	•	Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	XNone	

	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		
c	educational events	V. None	
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	XNone	
,	meetings and/or travel		
	meetings and/or traver		
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	X None	
	22222		
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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X_ I certify that I have answered every question and have not altered the wording of any of the form.	e questions on this

Date: Aug. 14th	, 2023
Your Name: Wei-	-Jie Guan
Manuscript Title:	Effects of occupational exposure to dust, gas, vapor and fumes on chronic bronchitis and lung
function	
Manuscript number	(if known): JTD-23-646

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	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
	<b>3</b>		
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	
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Date: Au	z. 14 <sup>th</sup> , 2023
Your Name:	Li-Feng Lin
Manuscript Tit	e: Effects of occupational exposure to dust, gas, vapor and fumes on chronic bronchitis and lung
function	
Manuscript nu	mber (if known): ITD-23-646

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