

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Given Name (First Name) Fuhai	2. Surname (Last Name) Chen	3. Date 25-October-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Ze Zhang Tao
5. Manuscript Title In vivo and in vitro investigation of KIN-193 anti-tumor effects on nasopharyngeal carcinoma		
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Corresponding Author's Name
Zezhang Tao

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25-October-2019

4. Are you the corresponding author?

Yes No

5. Manuscript Title

In vivo and in vitro investigation of KIN-193 anti-tumor effects on nasopharyngeal carcinoma

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

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Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest? Yes No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Dr. Li has nothing to disclose.

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