Date:July 1st, 2021
Your Name:Zhanli Jia
Manuscript Title:_Development and Validation of a Nomogram for Predicting the Subgroups of ER-Low-Positive Breast
Cancer_
Manuscript number (if known):TBCR-21-12

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) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
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.	X_None	
		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	X_None	
4	Consulting fees	X_None	

5	Payment or honoraria for lectures, presentations,	X_None	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X_None	
	testimony		
7	Comment for attending	V N	
/	Support for attending meetings and/or travel	X_None	
	meetings and/or traver		
8	Patents planned, issued or	V Name	
0	pending	X_None	
	benamb		
9	Participation on a Data	X_None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	X_None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X_None	
12	Receipt of equipment,	V N	
12	materials, drugs, medical writing, gifts or other	X_None	
	services		
13	Other financial or non- financial interests	X_None	
Ple	ease summarize the above o	onflict of interest in the fol	lowing box:
	None		
	None.		

form.

Date:July 1st	c, 2021
Your Name: Shi	ıyao Niu
Manuscript Title:	_Development and Validation of a Nomogram for Predicting the Subgroups of ER-Low-Positive
Breast Cancer	_
Manuscript numbe	r (if known):TBCR-21-12

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	No time limit for this item.		
		Time frame: past	36 months
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3	Royalties or licenses	X_None	
4	Consulting fees	X_None	

5	Payment or honoraria for lectures, presentations,	X_None	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X_None	
	testimony		
7	Comment for attending	V N	
/	Support for attending meetings and/or travel	X_None	
	meetings and/or traver		
8	Patents planned, issued or	V Name	
0	pending	X_None	
	benamb		
9	Participation on a Data	X_None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	X_None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X_None	
12	Receipt of equipment,	V N	
12	materials, drugs, medical writing, gifts or other	X_None	
	services		
13	Other financial or non- financial interests	X_None	
Ple	ease summarize the above o	onflict of interest in the fol	lowing box:
	None		
	None.		

form.

Date:July 1st, 2021
Your Name: Xinle Wang
Manuscript Title:_Development and Validation of a Nomogram for Predicting the Subgroups of ER-Low-Positive Breast
Cancer
Manuscript number (if known):TBCR-21-12

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		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	X_None	
4	Consulting fees	X _None	

5	Payment or honoraria for lectures, presentations,	X_None			
	speakers bureaus,				
	manuscript writing or				
	educational events	W			
6	Payment for expert	X_None			
	testimony				
7	Command for addition				
/	Support for attending meetings and/or travel	X_None			
8	Patents planned, issued or	X_None			
	pending				
9	Participation on a Data Safety Monitoring Board or	X_None			
	Advisory Board				
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	X_None			
11	Stock or stock options	V Name			
11	Stock of Stock options	X_None			
12	Receipt of equipment,	X None			
12	materials, drugs, medical	X_None			
	writing, gifts or other				
	services				
13	Other financial or non-	X_None			
	financial interests				
Ple	Please summarize the above conflict of interest in the following box:				
	None.				

Date:July 1st, 2021
Your Name: Si Wu
Manuscript Title:_Development and Validation of a Nomogram for Predicting the Subgroups of ER-Low-Positive Breast
Cancer_
Manuscript number (if known):TBCR-21-12

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		Time frame: Since the initial	planning of the work
1	All support for the present	X_None	
	manuscript (e.g., funding, provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	26 months
2	Grants or contracts from		36 months
2	any entity (if not indicated	X_None	
	in item #1 above).		
3	Royalties or licenses	X None	
3	Noyalties of ficerises	^ _None	
4	Consulting fees	Y None	
-	Consulting ICES	X_None	

5	Payment or honoraria for lectures, presentations,	X_None	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X_None	
	testimony		
7	Comment for attending	V N	
/	Support for attending meetings and/or travel	X_None	
	meetings and/or traver		
8	Patents planned, issued or	V Name	
0	pending	X_None	
	benamb		
9	Participation on a Data	X_None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	X_None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X_None	
12	Receipt of equipment,	V N	
12	materials, drugs, medical writing, gifts or other	X_None	
	services		
13	Other financial or non- financial interests	X_None	
Ple	ease summarize the above o	onflict of interest in the fol	lowing box:
	None		
	None.		

form.

Date:July 1st, 2021
Your Name:Jinze Li
Manuscript Title:_Development and Validation of a Nomogram for Predicting the Subgroups of ER-Low-Positive Breast
Cancer
Manuscript number (if known):TBCR-21-12

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2	Grants or contracts from any entity (if not indicated in item #1 above).	X_None		
3	Royalties or licenses	X_None		
4	Consulting fees	X_None		

	Payment or honoraria for lectures, presentations,	X_None		
	speakers bureaus,			
	manuscript writing or			
	educational events	•		
6	Payment for expert	X_None		
	testimony			
7	Command for addition			
/	Support for attending meetings and/or travel	X_None		
8	Patents planned, issued or	X_None		
	pending			
9	Participation on a Data	X_None		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	X_None		
	in other board, society,			
	committee or advocacy group, paid or unpaid			
11	Stock or stock options	V Name		
11	Stock of Stock options	X_None		
12	Receipt of equipment,	X None		
12	materials, drugs, medical	X_None		
	writing, gifts or other			
	services			
13	Other financial or non-	X_None		
	financial interests			
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Ple	Please summarize the above conflict of interest in the following box:			
	None.			

Date:July 1st, 2021
Your Name:Mengxue Han
Manuscript Title:_Development and Validation of a Nomogram for Predicting the Subgroups of ER-Low-Positive Breast
Cancer
Manuscript number (if known):TBCR-21-12

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3	Royalties or licenses	X_None		
4	Consulting fees	X_None		

	Payment or honoraria for lectures, presentations,	X_None		
	speakers bureaus,			
	manuscript writing or			
	educational events	•		
6	Payment for expert	X_None		
	testimony			
7	Command for addition			
/	Support for attending meetings and/or travel	X_None		
8	Patents planned, issued or	X_None		
	pending			
9	Participation on a Data	X_None		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	X_None		
	in other board, society,			
	committee or advocacy group, paid or unpaid			
11	Stock or stock options	V Name		
11	Stock of Stock options	X_None		
12	Receipt of equipment,	X None		
12	materials, drugs, medical	X_None		
	writing, gifts or other			
	services			
13	Other financial or non-	X_None		
	financial interests			
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Ple	Please summarize the above conflict of interest in the following box:			
	None.			

Date:July 1st, 2021
Your Name:Yueping Liu
Manuscript Title:_Development and Validation of a Nomogram for Predicting the Subgroups of ER-Low-Positive Breast
Cancer
Manuscript number (if known):TBCR-21-12

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3	Royalties or licenses	X_None		
4	Consulting fees	X_None		

	Payment or honoraria for lectures, presentations,	X_None		
	speakers bureaus,			
	manuscript writing or			
	educational events	•		
6	Payment for expert	X_None		
	testimony			
7	Command for addition			
/	Support for attending meetings and/or travel	X_None		
8	Patents planned, issued or	X_None		
	pending			
9	Participation on a Data	X_None		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	X_None		
	in other board, society,			
	committee or advocacy group, paid or unpaid			
11	Stock or stock options	V Name		
11	Stock of Stock options	X_None		
12	Receipt of equipment,	X None		
12	materials, drugs, medical	X_None		
	writing, gifts or other			
	services			
13	Other financial or non-	X_None		
	financial interests			
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Ple	Please summarize the above conflict of interest in the following box:			
	None.			