Date: <u>11/12/2021</u>			
Your Name: Jiachen X	1		
Manuscript Title: Re	al-time digital PCR as a novel technology improves limit of detection for rare allele assays		
Manuscript number (if kno	nwn)· TCI R-21-728		

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> manuscript only.

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)  Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)  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.	National Natural Sciences Foundation Beijing Hope Run Special Fund of Cancer Foundation of China Special Research Fund for Central Universities, Peking Union Medial College	To Dr. Jiachen Xu  To Dr. Jiachen Xu  To Dr. Jiachen Xu
2	Grants or contracts from any entity (if not indicated in item #1 above).  Royalties or licenses	Time frame: pastX_None  X_None	36 months
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	Command for add and in a	V Name	
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		
44	group, paid or unpaid	V N	
11	Stock or stock options	XNone	
12	Receipt of equipment,	X None	
12	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests	_	
DI			University of the second

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

This study was supported in part by my fundings. There are no conf	licts of interest.

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: 11/12/2021	
Your Name: Y	n Wang
Manuscript Title:	Real-time digital PCR as a novel technology improves limit of detection for rare allele assays
Manuscript numb	r (if known): TCLR-21-728

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 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)  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.	XNone	
2	Grants or contracts from any entity (if not indicated in item #1 above).	Time frame: pastXNoneXNone	36 months
4	Royalties or licenses  Consulting fees	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
-	6		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	XNone	
	pending		
•	B 11 11		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
10	Advisory Board	V. Nava	
10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
	Cook or stook opilions		
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
<b>~</b> !		andital afterna control to the first	laudaa kau
PIE	ease summarize the above of	ominict of interest in the fol	iowing box:
	There are no conflicts of interes	-+	
	inicie are no comincis or interes	ot.	

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: <u>11/12/202</u> 2	
Your Name: Z	hijie Wang
Manuscript Title:	Real-time digital PCR as a novel technology improves limit of detection for rare allele assays
Manuscrint numb	er (if known): TCLR-21-728

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 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)  Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
		CAMS Innovation Fund for Medical Sciences National Natural Sciences Foundation Beijing Natural Science Foundation Time frame: past	To Dr. Zhijie Wang  To Dr. Zhijie Wang  To Dr. Zhijie Wang
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 lectures, presentations,	XNone	

	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
	•	
12	Receipt of equipment,	X None
	materials, drugs, medical	
	writing, gifts or other	
	services	
13	Other financial or non-	XNone
	financial interests	

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

This study was supported in part by my fundings. There are no conflicts of interest.

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: <u>11/12/2021</u>		
Your Name: <u>Jie Wang</u>		
Manuscript Title: Rea	l-time digital PCR as a novel technology improves limit of detection for rare allele assays	
Manuscrint number (if know	un): TCI R-21-728	

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 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.	National Key Research and Development Project	To Dr. Jie Wang		
		National Natural Science Foundation Key Program	To Dr. Jie Wang		
		CAMS Innovation Fund for Medical Sciences	To Dr. Jie Wang		
		Aiyou Foundation	To Dr. Jie Wang		
		CAMS Key Lab of Translational Research on Lung Cancer	To Dr. Jie Wang		
	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	XNone			
Г	Dayment or beneraria for	V None			
5	Payment or honoraria for	XNone			
	lectures, presentations, speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	X None			
0	testimony	X_None			
	testimony				
7	Support for attending	X None			
,	meetings and/or travel	XNone			
	meetings and, or traver				
_					
8	Patents planned, issued or	XNone			
	pending				
	5	V N			
9	Participation on a Data	XNone			
	Safety Monitoring Board or				
10	Advisory Board	V N			
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	XNone			
12	Receipt of equipment,	X None			
	materials, drugs, medical				
	writing, gifts or other				
	services				
13	Other financial or non-	X None			
	financial interests				
Please summarize the above conflict of interest in the following box:  This study was supported in part by my fundings. There are no conflicts of interest.					
Т	his study was supported in part	by my fundings. There are	no conflicts of interest.		
Plea	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.