

ICMJE DISCLOSURE FORM

Date: 2023/04/17

Your Name: Meng Yuan

Manuscript Title: Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer

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	<u> X </u> None	
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None

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

ICMJE DISCLOSURE FORM

Date: 2023/04/17

Your Name: Chenlin Wang

Manuscript Title: Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2023/04/17

Your Name: Yanan Wu

Manuscript Title: Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: _____ 2023/04/17 _____

Your Name: _____ Lili Qiao _____

Manuscript Title: ___ Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer _____

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2023/04/17

Your Name: Guodong Deng

Manuscript Title: Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2023/04/17

Your Name: Ning Liang

Manuscript Title: Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer

Manuscript number (if known): _____

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Date: 2023/04/17

Your Name: Fangjie Chen

Manuscript Title: Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer

Manuscript number (if known): _____

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Date: 2023/04/17

Your Name: Li Liu

Manuscript Title: Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer

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Date: 2023/04/17

Your Name: Yanfei Chen

Manuscript Title: Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2023/04/17

Your Name: Yunxin Yang

Manuscript Title: Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer

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Date: 2023/04/17

Your Name: Hang Wang

Manuscript Title: Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

None

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

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

ICMJE DISCLOSURE FORM

Date: _____ 2023/04/17 _____
 Your Name: _____ Tong Liu _____
 Manuscript Title: ___ Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer _____
 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.) 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, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
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ICMJE DISCLOSURE FORM

Date: 2023/04/17

Your Name: Xiaofan Yang

Manuscript Title: Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2023/04/17

Your Name: Yingying Zhang

Manuscript Title: Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2023/04/17

Your Name: Yajuan Lv

Manuscript Title: Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer

Manuscript number (if known): _____

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N/A

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Rafael J. ...

ICMJE DISCLOSURE FORM

Date: 2023/04/17

Your Name: Pingping Hu

Manuscript Title: Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer

Manuscript number (if known):

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ICMJE DISCLOSURE FORM

Date: 2023/04/17

Your Name: Yan Zhang

Manuscript Title: Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2023/04/17

Your Name: Jiandong Zhang

Manuscript Title: Targeting complement C5a to improve radiotherapy sensitivity in non-small cell lung cancer

Manuscript number (if known): _____

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