

## ICMJE DISCLOSURE FORM

Date:04-08-2021

Your Name: Sui Chen

Manuscript Title:TPM3 mediates epithelial-mesenchymal transition in esophageal cancer via MMP2/MMP9

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.

The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.

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In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

|   |  | 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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| 3   | Royalties or licenses  | ___ None   |   |
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| 4   | Consulting fees  | ___ None   |   |
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| 7  | Support for attending meetings and/or travel   | ___ None |  |
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| 8  | Patents planned, issued or pending   | ___ None |  |
|    |  |          |  |
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| 9  | Participation on a Data Safety Monitoring Board or Advisory Board  | ___ None |  |
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| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid            | ___ None |  |
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| 11 | Stock or stock options   | ___ None |  |
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| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services                             | ___ None |  |
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| 13 | Other financial or non-financial interests   | ___ None |  |
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**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:**

X  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: 04-08-2021

Your Name: Zhimin Shen

Manuscript Title: TPM3 mediates epithelial-mesenchymal transition in esophageal cancer via MMP2/MMP9

Manuscript number (if known): \_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date:04-08-2021

Your Name: Lei Gao

Manuscript Title:TPM3 mediates epithelial-mesenchymal transition in esophageal cancer via MMP2/MMP9

Manuscript number (if known):\_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date:04-08-2021

Your Name: Shaobin Yu

Manuscript Title:TPM3 mediates epithelial-mesenchymal transition in esophageal cancer via MMP2/MMP9

Manuscript number (if known):\_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date:04-08-2021

Your Name: Peipei Zhang

Manuscript Title:TPM3 mediates epithelial-mesenchymal transition in esophageal cancer via MMP2/MMP9

Manuscript number (if known):\_\_\_\_\_

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| None. |
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## ICMJE DISCLOSURE FORM

Date:04-08-2021

Your Name: Ziyang Han

Manuscript Title:TPM3 mediates epithelial-mesenchymal transition in esophageal cancer via MMP2/MMP9

Manuscript number (if known):\_\_\_\_\_

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## ICMJE DISCLOSURE FORM

Date:04-08-2021

Your Name: Mingqiang Kang

Manuscript Title:TPM3 mediates epithelial-mesenchymal transition in esophageal cancer via MMP2/MMP9

Manuscript number (if known):\_\_\_\_\_

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