Date: 19/04/2021	
Your Name: Xi and Eng Xu	
Manuscript Title: An Extremely Rome Phenomenon of Mucinous Systic Neoplasmof the Liver: Spontaneous R	upture
Manuscript number (if known): 4891-21-102	

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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 initi	al 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.	None	
	The state of the s	Time frame: pas	st 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None
6	Payment for expert testimony	None
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8	Patents planned, issued or pending	None
9	Participation on a Data Safety Monitoring Board or Advisory Board	None
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None
11	Stock or stock options	None
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None
13	Other financial or non- financial interests	None

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

Date: 18/00/201.	
Your Name: (huanhui Perex	
Manuscript Title: An Bostremela Kove. Phenomenon. of Mucinous, Custic, Neoplasm, of the Liver Spontaneous, Rupti	ure
Your Name: Chuanhui Perey Manuscript Title: An Batremelos Kove. Phenomenon. of Mucinous. Cystic. Meoplasm. of the Liver: Spontaneous, Ruptu Manuscript number (if known): 188N - 1 - 102	

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	processing charges, etc.)		
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		Time frame: past	36 months
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	any entity (if not indicated		
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3	Royalties or licenses	None	
4	Consulting fees	None	
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5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending meetings and/or travel	<u>✓</u> None	
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8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	<u> </u> ✓ None	
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	committee or advocacy		
	group, paid or unpaid	,	
11	Stock or stock options	None	
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12	Receipt of equipment,	None	
	materials, drugs, medical writing, gifts or other		-
	services		
13	Other financial or non-	None	
13	financial interests		
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Date: 19/04/2021			
Your Name: Rong Worg. Tor	ez.		
Manuscript Title: An Fatrency	Kare Phenomenon of Mucinous	Cystic Nooblasm	of the Liver.
Manuscript number (if known):	1+BSN-21-102	- James Copen	1:
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Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events None	F-	ra en		
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manuscript writing or educational events 6 Payment for expert testimony 7 Support for attending meetings and/or travel 8 Patents planned, issued or pending 9 Participation on a Data Safety Monitoring Board or Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non- None				
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13 Other financial or non- None		되는 보이트의 교통이 프로토스 등에 하지만 회사되었습니다. 경우 경영 경영 경영 기업 이 없는데 되었다.		
financial interests	13		None	
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No conflict	of rinterest.

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

Date:	17/04/2	اده						
Your Name:	Miovoxia	Dong						
Manuscript Tit	le: An entrem	dy rave	phenomenon	of mucinous	systic neoplasm	f the liver:	sprtaneau	reptime
Manuscript nu				21-102				

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12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		-
	services		
13	Other financial or non-	None	
	financial interests		
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Date: (9/04/2921		
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Manuscript Title: Handscript number (if known):	Rare Phenomenon of Mucinous Cystre Neoplasm of the Liver spontaneous H135H-21-102	

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	testimony		
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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	<u>V</u> None	
	Advisory Board		
10	Leadership or fiduciary role in other board, society,	✓ None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	√ None	
	materials, drugs, medical writing, gifts or other services		
13	Other financial or non- financial interests	√ None	
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