Date:	August 9 th , 2021	
Your N	Name: <u>Lijun Qian</u>	
Manus	script Title: Circulating S100A4 as a prognostic biomarker for patients with nonparoxysmal atrial	
<u>fibrilla</u>	ation after catheter ablation	
Manus	script number (if known): ATM-21-1101	

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 initia	Specifications/Comments (e.g., if payments were made to you or to your institution)
	T		planning of the front
1	All support for the present	XNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
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 in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the f	ollowing box:
	None.		
L			

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

Date:	August 9 th , 2021	
Your N	Jame: Jinlong Gong	
Manus	script Title: Circulating S100A4 as a prognostic biomarker for patients with nonparoxysmal atrial	
fibrilla	tion after catheter ablation	
Manus	script number (if known): ATM-21-1101	

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	any entity (if not indicated		
	in item #1 above).		
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 in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the f	ollowing box:
	None.		
L			

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

Date:	August 9 th , 2021	
Your N	Name: Wenjie Ma	
Manu	uscript Title: Circulating S100A4 as a prognostic biomarker for patients with nonparoxysmal atrial	
fibrilla	ation after catheter ablation	
Manu	uscript number (if known): ATM-21-1101	

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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.	XNone	
		Time frame: past	36 months
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 in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the f	ollowing box:
	None.		
L			

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

Date: August 9 th , 2021	
Your Name: Yan Sun	
Manuscript Title: Circulating S100A4 as a prognostic biomarker for patients with nonparoxysmal atrial	
fibrillation after catheter ablation	
Manuscript number (if known): ATM-21-1101	

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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1	All support for the present	XNone	
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9	Participation on a Data	XNone	
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	Advisory Board		
10	Leadership or fiduciary role in other board, society,	XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the f	ollowing box:
	None.		
L			

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

Date: August 9 th , 2021	
Your Name: Jian Hong	
Manuscript Title: Circulating S100A4 as a prognostic biomarker for patients with nonparoxysmal atrial	
fibrillation after catheter ablation	
Manuscript number (if known): ATM-21-1101	

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10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non- financial interests	X None	
Ple	ease summarize the above c	onflict of interest in the f	ollowing box:
	None.		

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

Date: _	August 9 th , 2021
Your Na	ame: Di Xu
Manus	cript Title: Circulating S100A4 as a prognostic biomarker for patients with nonparoxysmal atrial
<u>fibrillat</u>	tion after catheter ablation
Manuso	crint number (if known): ATM-21-1101

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	educational events		
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7	Support for attending meetings and/or travel	XNone	
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11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non- financial interests	X None	
Ple	ease summarize the above c	onflict of interest in the f	ollowing box:
	None.		

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

Date:	August	9 th , 2021	
Your N	Name:	Ming Chu	
Manu	script Title:	Circulating S100A4 as a prognostic biomarker for patients with nonparoxysmal atrial	
fibrilla	ation after o	atheter ablation	
Manu	script numb	per (if known): ATM-21-1101	

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	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	
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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	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non- financial interests	X None	
Ple	ease summarize the above c	onflict of interest in the f	ollowing box:
	None.		

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