

ICMJE DISCLOSURE FORM

Date: 7/5/2021

Your Name: Xiaolei Chen

Manuscript Title: Functional assessment of a novel COL45A splicing site variant in a Chinese X-linked Alport syndrome family

Manuscript number (if known): ATM-21-3523

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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		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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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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13	Other financial or non-financial interests	___ None	

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None

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Date: 7/5/2021

Your Name: Nan Ye

Manuscript Title: Functional assessment of a novel COL45A splicing site variant in a Chinese X-linked Alport syndrome family

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Date: 7/5/2021

Your Name: Lu Zhang

Manuscript Title: Functional assessment of a novel COL45A splicing site variant in a Chinese X-linked Alport syndrome family

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Date: 7/5/2021

Your Name: Wen Zheng

Manuscript Title: Functional assessment of a novel COL45A splicing site variant in a Chinese X-linked Alport syndrome family

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Your Name: Jinggiu Cheng

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