

ICMJE DISCLOSURE FORM

Date: 20220511

Your Name: Peiyi Xie

Manuscript Title: CD44 potentiates hepatocellular carcinoma migration and extrahepatic metastasis via the AKT/ERK signaling CXCR4 axis

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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Time frame: past 36 months			
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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: 20220511

Your Name: Jiuliang Yan

Manuscript Title: CD44 potentiates hepatocellular carcinoma migration and extrahepatic metastasis via the AKT/ERK signaling CXCR4 axis

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 20220511

Your Name: Mengyuan Wu

Manuscript Title: CD44 potentiates hepatocellular carcinoma migration and extrahepatic metastasis via the AKT/ERK signaling CXCR4 axis

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 20220511

Your Name: Hui Li

Manuscript Title: CD44 potentiates hepatocellular carcinoma migration and extrahepatic metastasis via the AKT/ERK signaling CXCR4 axis

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ICMJE DISCLOSURE FORM

Date: 20220511
 Your Name: Zheng Chen
 Manuscript Title: CD44 potentiates hepatocellular carcinoma migration and extrahepatic metastasis via the AKT/ERK signaling CXCR4 axis
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ICMJE DISCLOSURE FORM

Date: 20220511
 Your Name: Mincheng Yu
 Manuscript Title: CD44 potentiates hepatocellular carcinoma migration and extrahepatic metastasis via the AKT/ERK signaling CXCR4 axis
 Manuscript number (if known): _____

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Date: 20220511

Your Name: Bo Zhang

Manuscript Title: CD44 potentiates hepatocellular carcinoma migration and extrahepatic metastasis via the AKT/ERK signaling CXCR4 axis

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Date: 20220511
 Your Name: Lingli Chen
 Manuscript Title: CD44 potentiates hepatocellular carcinoma migration and extrahepatic metastasis via the AKT/ERK signaling CXCR4 axis
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Date: 20220511

Your Name: Lei Jin

Manuscript Title: CD44 potentiates hepatocellular carcinoma migration and extrahepatic metastasis via the AKT/ERK signaling CXCR4 axis

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Date: 20220511
 Your Name: Binghai Zhou
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Date: 20220511
 Your Name: Xiaoqiang Li
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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
11	Stock or stock options	<input checked="" type="checkbox"/> None	
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: 20220511
 Your Name: Yongsheng Xiao
 Manuscript Title: CD44 potentiates hepatocellular carcinoma migration and extrahepatic metastasis via the AKT/ERK signaling CXCR4 axis
 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)
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ICMJE DISCLOSURE FORM

Date: 20220511

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ICMJE DISCLOSURE FORM

Date: 20220511

Your Name: Jiang Long

Manuscript Title: CD44 potentiates hepatocellular carcinoma migration and extrahepatic metastasis via the AKT/ERK signaling CXCR4 axis

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 20220511
 Your Name: Jubo Zhang
 Manuscript Title: CD44 potentiates hepatocellular carcinoma migration and extrahepatic metastasis via the AKT/ERK signaling CXCR4 axis
 Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 20220511

Your Name: Lei Guo

Manuscript Title: CD44 potentiates hepatocellular carcinoma migration and extrahepatic metastasis via the AKT/ERK signaling CXCR4 axis

Manuscript number (if known): _____

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