Date:2021-2-26	
Your Name: Yiming Liang	
Manuscript Title: Atypical meningioma: a retrospective analysis of six cases and literature review	
Manuscript number (if known):	

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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)
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 None	planning of the work
3	Grants or contracts from any entity (if not indicated in item #1 above).  Royalties or licenses	None  None	36 months
4	Consulting fees	None	

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	None
8	Patents planned, issued or	None
	pending	
9	Participation on a Data	None
	Safety Monitoring Board or	
	Advisory Board	
10	Leadership or fiduciary role	None
	in other board, society,	
	committee or advocacy group, paid or unpaid	
11	Stock or stock options	None
	·	
12	Receipt of equipment, materials, drugs, medical	None
	writing, gifts or other services	
13	Other financial or non-	None
	financial interests	

There is no any conflict of interest.	

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

Date:2021-2-26
Your Name: Bo Ning
Manuscript Title: Atypical meningioma: a retrospective analysis of six cases and literature review
Manuscript number (if known):

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4	Consulting fees	None	

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	None
8	Patents planned, issued or	None
	pending	
9	Participation on a Data	None
	Safety Monitoring Board or	
	Advisory Board	
10	Leadership or fiduciary role	None
	in other board, society,	
	committee or advocacy group, paid or unpaid	
11	Stock or stock options	None
	·	
12	Receipt of equipment, materials, drugs, medical	None
	writing, gifts or other services	
13	Other financial or non-	None
	financial interests	

There is no any conflict of interest.	

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

Date:2021-2-26
Your Name: Xing Hua
Manuscript Title: Atypical meningioma: a retrospective analysis of six cases and literature review
Manuscript number (if known):

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4	Consulting fees	None	

5	Payment or honoraria for	None
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	speakers bureaus,	
	manuscript writing or	
	educational events	
6	Payment for expert	None
	testimony	
7	Support for attending meetings and/or travel	None
8	Patents planned, issued or	None
	pending	
9	Participation on a Data	None
	Safety Monitoring Board or	
	Advisory Board	
10	Leadership or fiduciary role	None
	in other board, society,	
	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-	None
	financial interests	

There is no any conflict of interest.	

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

Date:2021-2-26
Your Name: Zhiping Liang
Manuscript Title:Atypical meningioma: a retrospective analysis of six cases and literature review
Manuscript number (if known):
•

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3	Grants or contracts from any entity (if not indicated in item #1 above).  Royalties or licenses	None  None	36 months
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	speakers bureaus,	
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	educational events	
6	Payment for expert	None
	testimony	
7	Support for attending meetings and/or travel	None
8	Patents planned, issued or	None
	pending	
9	Participation on a Data	None
	Safety Monitoring Board or	
	Advisory Board	
10	Leadership or fiduciary role	None
	in other board, society,	
	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
	financial interests	

There is no any conflict of interest.	

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

Date:2021-2-26
Your Name: Jingchao Ye
Manuscript Title:Atypical meningioma: a retrospective analysis of six cases and literature review
Manuscript number (if known):
William Series (In Kilowi).

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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	I 411		planning of the work
1	All support for the present	None	
	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	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

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	None
8	Patents planned, issued or	None
	pending	
9	Participation on a Data	None
	Safety Monitoring Board or	
	Advisory Board	
10	Leadership or fiduciary role	None
	in other board, society,	
	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-	None
	financial interests	

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

Date:2021-2-26
Your Name: Fangyi Yu
Manuscript Title:Atypical meningioma: a retrospective analysis of six cases and literature review
Manuscript number (if known):
•

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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	None
8	Patents planned, issued or	None
	pending	
9	Participation on a Data	None
	Safety Monitoring Board or	
	Advisory Board	
10	Leadership or fiduciary role	None
	in other board, society, 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-	None
	financial interests	

There is no any conflict of interest.	

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

Date:2021-2-26
Your Name: Zhilei Xu
Manuscript Title:Atypical meningioma: a retrospective analysis of six cases and literature review
Manuscript number (if known):

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	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	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

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	None
8	Patents planned, issued or	None
	pending	
9	Participation on a Data	None
	Safety Monitoring Board or	
	Advisory Board	
10	Leadership or fiduciary role	None
	in other board, society, 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-	None
	financial interests	

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Date:2021-2-26
Your Name: Jiaxiang Chen
Manuscript Title: Atypical meningioma: a retrospective analysis of six cases and literature review
Manuscript number (if known):

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

There is no any conflict of interest.					

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