Date: __ Jul. 9th, 2021 __
Your Name: Yi Dai
Manuscript Title: Clinical and genetic spectrum of neonatal arrhythmia in a NICU
Manuscript number (if known): ______ TP-21-233

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| 3 | Royalties or licenses                                                                              | _ X ___None                                                                     |
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|   | Description                                                                 | _X_ | None |
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| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | _X_ | None |
| 6 | Payment for expert testimony                                                | _X_ | None |
| 7 | Support for attending meetings and/or travel                                 | _X_ | None |
| 8 | Patents planned, issued or pending                                           | _X_ | None |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board            | _X_ | None |
| 10| Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | _X_ | None |
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| 12| Receipt of equipment, materials, drugs, medical writing, gifts or other services | _X_ | None |
| 13| Other financial or non-financial interests                                    | _X_ | None |

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Date: __Jul. 9th, 2021__
Your Name: __Rong Yin__
Manuscript Title: __Clinical and genetic spectrum of neonatal arrhythmia in a NICU__
Manuscript number (if known): _______TP-21-233_____________________________

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|   |                                                                                               |                                                                                   |
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| 6 | Payment for expert testimony                                    | _ X ___None |
| 7 | Support for attending meetings and/or travel                     | _ X ___None |
| 8 | Patents planned, issued or pending                               | _ X ___None |
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|11 | Stock or stock options                                          | _ X ___None |
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|13 | Other financial or non-financial interests                       | _ X ___None |

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Date: _Jul. 9th, 2021_  
Your Name: _Lin Yang_  
Manuscript Title: _Clinical and genetic spectrum of neonatal arrhythmia in a NICU_  
Manuscript number (if known): _TP-21-233_

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|   | Description                                                                 | _X_ | None |
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| 6 | Payment for expert testimony                                               | _X_ | None |
| 7 | Support for attending meetings and/or travel                                | _X_ | None |
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Date: Jul. 9th, 2021
Your Name: Zhihua Li
Manuscript Title: Clinical and genetic spectrum of neonatal arrhythmia in a NICU
Manuscript number (if known): TP-21-233

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|   | **No time limit for this item.** | |

|   | **Time frame: Since the initial planning of the work** | |
|---|---|---|
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | None |
| 3 | Royalties or licenses | None |
| 4 | Consulting fees | None |

|   | **Time frame: past 36 months** | |
|---|---|---|
|  |   |   |
|   |                                                                                     | X | None     |
|---|-------------------------------------------------------------------------------------|---|----------|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | X | None     |
| 6 | Payment for expert testimony                                                        | X | None     |
| 7 | Support for attending meetings and/or travel                                        | X | None     |
| 8 | Patents planned, issued or pending                                                  | X | None     |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board                   | X | None     |
|10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | X | None     |
|11 | Stock or stock options                                                               | X | None     |
|12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services     | X | None     |
|13 | Other financial or non-financial interests                                           | X | None     |

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