

Change of Authorship Form

(Must be completed and signed by ALL authors)

Please check all that apply

New author(s) have been added (in addition to this form, all new authors must complete the copyright transfer agreement and conflict of interest disclosure.

Change in order of authorship.

An author wishes to remove his/her name. An author's name may only be removed his/her own request and a letter signed by the author should accompany this form

Manuscript Number STROKE/2020/034093

Manuscript Title Metabolic traits and stroke risk in individuals of African ancestry: Mendelian randomization analysis

Former Authorship

Please list ALL AUTHORS in the same order as the original submission. For more than 12, use an extra sheet.

Print Name

Name (1) Scott M. Damrauer
 Name (2) Marijana Vujkovic
 Name (3) Keith L. Keene
 Name (4) Myriam Fornage
 Name (5) Marjo-Riitta Järvelin
 Name (6) Stephen Burgess

Print Name

Name (7) Dipender Gill
 Name (8) _____
 Name (9) _____
 Name (10) _____
 Name (11) _____
 Name (12) _____

New Authorship

All authors must sign below agreeing to the changes in authorship. The authorship order must reflect the authorship order of the manuscript.

Name (1)	<u>Scott M. Damrauer</u>	Signature	_____	Date	_____
Name (2)	<u>Marijana Vujkovic</u>	Signature		Date	<u>11 Feb 2021</u>
Name (3)	<u>Keith L. Keene</u>	Signature	_____	Date	_____
Name (4)	<u>Myriam Fornage</u>	Signature	_____	Date	_____
Name (5)	<u>Marjo-Riitta Järvelin</u>	Signature	_____	Date	_____
Name (6)	<u>Stephen Burgess</u>	Signature	_____	Date	_____
Name (7)	<u>Dipender Gill</u>	Signature	_____	Date	_____
Name (8)	_____	Signature	_____	Date	_____
Name (9)	_____	Signature	_____	Date	_____
Name (10)	_____	Signature	_____	Date	_____
Name (11)	_____	Signature	_____	Date	_____
Name (12)	_____	Signature	_____	Date	_____

Please scan and email to stroke@strokeahajournal.org.