

## Conflict of Interest

The purpose of this form is to provide readers of your paper with information about your other interests that could influence how they receive and understand your work. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form has six parts.

### Section 1: Identifying Information

1. Your First Name: Meilinah Middle Name: Family Name: Hidayat

2. Are the Corresponding Author

Yes  No If No, then name the Corresponding Author Wahyu Widowati

3. Manuscript Title:

Modulation of adipogenesis-related gene expression by ethanol extract of Detam 1 soybean and Jati belanda leaves in 3T3-L1 Cells

4. Manuscript ID:

26471-95585-2-SM.DOCX

### Section 2: The work under consideration for publication

Your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  Yes  No

If yes, please fill out the appropriate information below.

Name of Institution/Company	Grant?	Personal fees	Non-financial support	Others	Comment
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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#### Section 4: [Intellectual Property - Patents & Copyrights](#)

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?

Yes  No

If yes, please fill out the appropriate information below.

Patent?	Pending?	Issued?	Licensed?	Royalties?	Licensee?	Comment
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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#### Section 5: [Relationships not covered above](#)

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

Yes, the following relationships/conditions/circumstances are present (explain below):

Wahyu Widowati

No other relationships/conditions/circumstances that present a potential conflict of interest

#### Section 6: [Disclosure Statement](#)

Signature:

Meilinah Hidayat

Date:

April 27 2016

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### Section 1: Identifying Information

1. Your First Name: Sijani Middle Name: Family Name: Prahastuti

2. Are the Corresponding Author

Yes  No If No, then name the Corresponding Author Wahyu Widowati

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Sijani Prahastuti

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1. Your First Name: Nurul Middle Name: Family Name: Fauziah

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Yes  No If No, then name the Corresponding Author Wahyu Widowati

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Yes  No If No, then name the Corresponding Author Wahyu Widowati

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Signature:

Dr. Wahyu Widowati, M.Si

Date:

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