

## Conflict of Interest

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### Section 1: Identifying Information

1. Your First Name: Middle Name: Family Name:  
Dhineshkumar Manoharan
2. Are the Corresponding Author  
 Yes  No If No, then name the Corresponding Author
3. Manuscript Title:  
Synthesis, Characterization and Evaluation of Antidiabetic Activity of Novel Indoline Derivatives
4. Manuscript ID:  
30872

### 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"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### Section 3: Relevant financial activities outside the submitted work

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. You should report relationships that were present during the 36 months prior to publication.

Are there any relevant conflicts of interest?  Yes  No

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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):

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

Section 6: [Disclosure Statement](#)

Signature:

Dhineshkumar

Date:

11.04.2017

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### Section 1: Identifying Information

1. Your First Name: Kannan Middle Name: Family Name: Kulanthai
2. Are the Corresponding Author  
 Yes  No If No, then name the Corresponding Author Dhineshkumar Mnnoharan
3. Manuscript Title:  
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ORCID iD: 0000-0003-1325-3608

Date: 27/4/2017

email: kannan\_k2002@yahoo.co.in

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2. Are the Corresponding Author  
 Yes  No If No, then name the Corresponding Author Dhineshkumar Manoharan
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Section 6: [Disclosure Statement](#)

ORCID iD: 0000-0002-2771-4279

Date: 18-04-2017

email: gnanamphd@gmail.com

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1. Your First Name: Middle Name: Family Name:  
Vijayan Raji
2. Are the Corresponding Author  
 Yes  No If No, then name the Corresponding Author Dhineshkumar Manoharan
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Dhineshkumar Manoharan

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Signature:

R.Vijayan

Date:

11.04.2017



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2. Are the Corresponding Author  
 Yes  No If No, then name the Corresponding Author Dhineshkumar Mnnoharan
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Dhineshkumar Mnnoharan

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Signature:

PALVANNAN THAYUMANAVAN

Date:

27.04.2017