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:	1	Middle Nam	e:	Family N	lame:		
	Uzma				Saleem			
2.	Are the Corresponding A	uthor						
	¥Yes ☐ No If No, t	hen name	e the Corres	sponding Author	-			
3.	Manuscript Title:							
	Evaluation of Cestrum nocturnum (Lady of Night) effects on kidney; nephro-protective and nephro-curative studies in rabbits							
4.	Manuscript ID:							
	32790							
Section	n 2: The work under consi	deration	for publicat	ion				
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Name	e of Institution/Company	Grant?	Personal fees	Non-financial support	Others	Comment		
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If yes, please fill out the appropriate information below. Name of Institution/Company | Grant? | Personal | Non-financial | Others | Comment

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Section 4: I	ntellectual Prop	perty -	Patent	s & Copyrig	<u>hts</u>		
Do you have	e any patents,	wheth	er plan	ned, pendin	g or issued, b	roadly relev	ant to the work?
Yes 🗸	No						
If yes, plea	se fill out the	appro	priate	informatior	n below.		
Patent?	Pending?	Issue	d?	Licensed?	Royalties?	Licensee?	Comment
Section 5: F	Relationships no	ot cove	ered ab	<u>ove</u>			
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Yes, the	following relati	onship	os/cond	itions/circur	nstances are	present (exp	olain below):
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✓ No other	relationships/o	conditi	ons/circ	cumstances	that present a	a potential c	onflict of interest
Section 6: [Disclosure State	ement					
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This article is no	ot submitted to any c	otner joui	mai.				
OPCID ID:	orcid.org/0000-0002	-1541-42	236	Date:	16-6-2017		

email: uzma95@gmail.com

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Middle Name:

Family Name:

Section 1: <u>Identifying Information</u>

1. Your First Name:

	Bashir						Ahmad		
2. Are the Corresponding Author									
	Yes No If	No, then	nam	e the Corres	sponding Aut	hor	Dr. Uzma	Saleem	
3.	Manuscript Title:	Manuscript Title:							
Determination of anti-ulcer activity of Cestrum nocturnum leaves in ethanol and indomethacin induced							duced ulcer models		
4.	Manuscript ID:								
	32790								
Section	n 2: The work under	<u>considera</u>	tion	for publicati	<u>on</u>				
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Name	e of Institution/Compa	any Gra	int?	Personal fees	Non-financi support	al	Others	Comment	
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If yes, please fill out the appropriate information below. Name of Institution/Company Grant? Personal Non-financial Others Comment fees support 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 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 All provided information is true

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