

# CONFLICT OF INTEREST FORM

As the corresponding author, I declare the following information regarding the specific conflicts of interest of authors of our aforementioned manuscript.

I accept the responsibility for the completion of this document and attest to its validity on behalf of all co-authors.

**Manuscript title:** \_\_\_\_\_

| <b>Author</b> | <b>No conflict involved</b> | <b>Conflict (specify)</b> |
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**Signature** \_\_\_\_\_ **Date :** \_\_\_\_\_