Date: <u>2023/1/3</u>
Your Name: Hong Yu
Manuscript Title: Exploring the molecular targets and mechanism of S. miltiorrhiza-C. aromatica in treating polycysti
ovary syndrome based on network pharmacology_
Manuscript number (if known):

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
,		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations,	_ <b>X</b> None	
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	X None	
	testimony	_ XNone	
	,		
7	Support for attending meetings and/or travel	<b>X</b> None	
	_		
8	Patents planned, issued or	_ <b>X</b> None	
	pending		
9	Participation on a Data	V Nove	
9	Safety Monitoring Board or	XNone	
	Advisory Board		
10	Leadership or fiduciary role	_ XNone	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	_ <b>X</b> None	
12	Receipt of equipment,	X None	
	materials, drugs, medical	XNone	
	writing, gifts or other services		
13	Other financial or non-	<b>X</b> None	
	financial interests		
Ple	ease summarize the above o	onflict of interest in the fo	llowing box:
	V		
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_X _ I certify that I have answered every question and have not altered the wording of any of the questions on th form.	is

Date: 2023/1/3	
Your Name: Lan Zhang	
Manuscript Title: Exploring the molecular targets and mechanism of S. miltiorrhiza-C. aromatica in treating p	olycystic
ovary syndrome based on network pharmacology_	
Manuscript number (if known):	

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Date: 2023/1/3
Your Name: Fei Yin
Manuscript Title: Exploring the molecular targets and mechanism of S. miltiorrhiza-C. aromatica in treating polycystic
ovary syndrome based on network pharmacology_
Manuscript number (if known):

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Date: <u>2023/1/3</u>	
Your Name: Jie Chen	
Manuscript Title: Exploring the molecular targets and mechanism of S. miltiorrhiza-C. aromatica in treating polycy	ystic
ovary syndrome based on network pharmacology _	
Manuscript number (if known):	

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Date: 2023/1/3
Your Name: Jijun Chu
Manuscript Title: Exploring the molecular targets and mechanism of S. miltiorrhiza-C. aromatica in treating polycyst
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Manuscript number (if known):

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