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Date: 701.	
Your Name: Zifeng	Ma
Manuscript Title: Lingga	an Wuwei Jiangxin formula ameliorates airway hyperresponsiveness through suppressior
of IL-1	β and IL-17A expression in allergic asthmatic mice especially with diet-induced obesity
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>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)  Time frame: Since the initia	Specifications/Comments (e.g., if payments were made to you or to your institution)
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.	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations, speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
		1	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	College Street S
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

There is no conflicts of intere	st.

Please place an "X" next to the following statement to indicate your agreement:

and ?.
Date:
Your Name: Cur Li
Manuscript Title: Linggan Wuwei Jiangxin formula ameliorates airway hyperresponsiveness through suppression
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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 initia	al 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.	None	
N. Kr.	THE REPORT OF THE PROPERTY OF THE PARTY OF T	Time frame: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert	None	<ul><li>(2) - (2) Alexandria (Control of Section Alexandria) (Control of Section 2 Section 2 Section 2 Section 3 S</li></ul>
	testimony	,	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data	None	A SAME AND THE PERSON OF THE P
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	None	
12	Receipt of equipment,	None	CONTRACTOR OF THE STATE OF THE
	materials, drugs, medical writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		

There is no conflicts o	f interest.		
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Please place an "X" next to the following statement to indicate your agreement:

Date:
Your Name: Lingha Xud
Manuscript Title: Linggan Wuwei Jiangxin formula ameliorates airway hyperresponsiveness through suppression
of IL-1β and IL-17A expression in allergic asthmatic mice especially with diet-induced obesity
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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)
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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.	None	
	<b>《公共存在的制度》</b>	Time frame: pa	st 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		[18] [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [
	manuscript writing or educational events		
6	Payment for expert testimony	None	는 보통한 경제화면 제대보면 보고는 마다는 것으로 생각하고 생각 경험 사용하다 있다. (현리가 살아보면 보고 함께 보
7	Support for attending meetings and/or travel	<u>✓</u> None	
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8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
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10	Leadership or fiduciary role	None	THE RESEARCH PROCESS OF THE CONTROL OF T
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	<u>√</u> None	
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12	Receipt of equipment, materials, drugs, medical	<u>√</u> None	
	writing, gifts or other services		
13	Other financial or non-	None	
7	financial interests		
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There is no conflicts of interest.	

Please place an "X" next to the following statement to indicate your agreement:

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Date:
Your Name: Sharyan In any
Manuscript Title: Linggan Wuwei Jiangxin formula ameliorates airway hyperresponsiveness through suppression
of IL-1 $\beta$ and IL-17A expression in allergic asthmatic mice especially with diet-induced obesity
Manuscript number (if known):
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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

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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.

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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)
	<b>1</b> 万岁的"美国基础"的"	Time frame: Since the initia	l 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.	None	
	PRINCIPAL PROPERTY OF THE PROP	Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

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8 Pate	ents planned, issued or ding	None						
Safe	icipation on a Data ety Monitoring Board or isory Board	None						
10 Lead in of com	dership or fiduciary role ther board, society, mittee or advocacy up, paid or unpaid	None	Neth (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		製鋼化 するない ないかんこう がかり いっぱ		ED TENER E EN LES TREATMENTS EN LES TR
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13 Oth	er financial or non- ncial interests	None					1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

Please place an "X" next to the following statement to indicate your agreement:

Date: MWY. W
Your Name: 1904 (Line) 1 am
Manuscript Title: Linggan Wuwei Jiangxin formula ameliorates airway hyperresponsiveness through suppression
of IL-1β and IL-17A expression in allergic asthmatic mice especially with diet-induced obesity
Manuscript number (if known):

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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)
	(Photographic Company)	Time frame: Since the initia	al planning of the work
1	All support for the present manuscript (e.g., funding,	None	
	provision of study materials,		
E,	medical writing, article		
1	processing charges, etc.)		
	No time limit for this item.		
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2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
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4	Consulting fees	None	
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5	Payment or honoraria for	None	
	lectures, presentations,		요. 그 아이는 경우를 잃고 있어요 그 아이는 어린이 아이들이 모르게 됐다.
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
	in the action of the state of the first		
8	Patents planned, issued or pending	None	
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	None	
		TRANSPORTER	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other services		
13	Other financial or non-	None	
	financial interests	[설명 (18] 10 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -	

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Please place an "X" next to the following statement to indicate your agreement:

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Your Name: Huifford / New
Manuscript Title: Linggan Wuwei Jiangxin formula ameliorates airway hyperresponsiveness through suppression
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		Time frame: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None	
STATE OF THE STATE	lectures, presentations,		
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data	None	
	afety Monitoring Board or dvisory Board		
10	Leadership or fiduciary role in other board, society,	None	2005 SERVICE S
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	None	
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12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other services		
13	Other financial or non- financial interests	None	

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Please place an "X" next to the following statement to indicate your agreement:

Date:
Your Name: Zhenni Lu
Manuscript Title: Linggan Wuwei Jiangxin formula ameliorates airway hyperresponsiveness through suppression
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All support for the present manuscript (e.g., funding, provision of study materials,	None	
Processing charges, etc.)  No time limit for this item.	· 解除性 中国 自己的	The first of the f
提出的自由的主义。在西部中的自己		t 36 months
any entity (if not indicated	None	
Royalties or licenses	None	
Consulting fees	None	
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	manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.  Grants or contracts from any entity (if not indicated in item #1 above).  Royalties or licenses	whom you have this relationship or indicate none (add rows as needed)  Time frame: Since the inition of the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.  Time frame: past of the inition of the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.

5	Payment or honoraria for	None	
	lectures, presentations, speakers bureaus,		2016년 - 12 1일 - 12 1일 2017년 - 12 12 12 12 12 12 12 12 12 12 12 12 12
	manuscript writing or		도 선생님 이 전에 발생하면 하면 되었다. 전환
	educational events		
6	Payment for expert testimony	None	
	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
ο .	Participation on a Data	(NI)	
9	Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
7 			
11	Stock or stock options	None	
2	Receipt of equipment,	, / None	
	materials, drugs, medical writing, gifts or other services	None	
		1	
L3		None	

There is no conflicts of interest.	

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