

# Conflict of Interest Disclosure Form for Journal Reviewers

## Reviewer Information

Full Name

Email Address

Affiliation

## Manuscript Information

Manuscript Title

Manuscript ID (if available)

## Disclosure of Conflict of Interest

☐ I declare that I have no conflict of interest related to the review of this manuscript.

☐ I wish to disclose the following potential conflicts of interest:

## Certification

☐ I certify that the information provided above is accurate and complete to the best of my knowledge.