

COPY RIGHT FORM

American Journal of Pharmacy and Health Research I certify that I have participated sufficiently in the conception and design of this work

entitled"		
•••••	••••••	••••••
Manuscript number And		
the analysis of the data, as well as writing of this manuscript, to take public		
responsibility for it. I believe the manuscript represents valid work. I have reviewed the		
final version of manuscript and approve it for publication. The manuscript is not		
published elsewhere, in any language, and is not under simultaneous consideration by any		
other journal. All Authors agree that the contents of the manuscript are confidential and		
will not be copyrighted, submitted, or published elsewhere, in any language, while		
acceptance by the Journal is under consideration. Furthermore I attest that I shall produce		
the data upon which the manuscript is based for examination by the editors or their		
assignees, if requested.		
I further confirm that this article has not been published elsewhere, nor is it under		
consideration by any other publisher.		
Name	Signature	Date
Corresponding Author name & Signature		
Co- Author name & Signature		
		1

Agreed- Yes

After completion of this form, please email the scanned file of original signed form to editor@ajphr.com