

## COVER LETTER

From

Corresponding author

Name:

Address:

Phone No:

Mail:

Manuscript title.....

.....

Type of article, (put  mark)  Review article  Research article  Short communication

I affirm that the manuscript has been prepared in according IJICAB aims and scope author guidelines.

On submission of the manuscript, the authors agree not to withdraw their manuscript at any stage prior to Publication. I have read the manuscript and I hereby affirm that the content of this manuscript or a major portion thereof has not been published in a refereed journal, and it is not being submitted for publication elsewhere. No responsibility is implicit by IJICAB, its staff or members of the editorial board for any injury and/or damage to persons or property as a matter of products accountability, negligence or otherwise, or from any use or operation of any methods, products instruction, advertisements or ideas contained in a publication by IJICAB.

Any suggested peer reviewers

Referee-1

Name:

Affiliation:

Email:

Referee-2

Name:

Affiliation:

Email:

*Original Signature and date*

**Please send your signed copy of this covering letter and along with your manuscript to the publisher.**