ICMJE DISCLOSURE FORM

Date:July 10, 2021	
Your Name:_Usha Ram	
Manuscript Title:_ Trends in materi 1997-2018	nal mortality in India over two decades: Nationally-representative surveys from
Manuscript number (if known):	_ ID BJOG-21-0361

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</u> <u>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.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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	Time frame: Since the initial planning of the work					
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	processing charges, etc.)					
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	Auvisoly boald	
10	Leadership or fiduciary role	X None
	in other board, society,	
	committee or advocacy	
	group, paid or unpaid	
11	Stock or stock options	X None
12	Receipt of equipment,	X None
12	materials, drugs, medical	X None
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	services	
13	Other financial or non-	X None
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Please place an "X" next to the following statement to indicate your agreement:

X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

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Usha Ram