

**SCHEDULE - II**  
**FORM - V**  
**PROFORMA FOR PRICE LIST**  
**(See paragraphs 2(x),24,25,26)**

1. **Name and address of the manufacturer / importer / distributor :** Akums Drugs & pharmaceuticals Ltd, Add :304, Mohan Place, Local Shopping Complex, Block - C, Opposite Post Office, Saraswati Vihar, New Delhi, North West, Delhi, 110034
2. **Name and address of the marketing company, if any :** Alembic Pharmaceuticals Limited, Add :Alembic Road, Vadodara, Vadodara, Vadodara, Gujarat, 390002

TABLE-A										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
	Imported Formulations									
TABLE-B										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Non-Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
1	Albrim T 0.5/0.2 % Eye Drops 5 MI(5.00 MI) (Timolol + Brimonidine EYE DROPS)	Timolol + Brimonidine 0.5/0.2 % EYE DROPS	5.00 ML	12.00	104.79	116.43	148.90	163.00	GC4787006 & Jul-2024	15000
	Imported Formulations									

**Notes:-**In case of purchased/imported formulation, Name of the manufacturer shall be indicated.

The information furnished above is correct and true to the best of my knowledge and belief.

Place : Delhi

Date : 30-Aug-2024

**Authorized Signatory :** Saibal Mukherjee  
**Name :** Saibal Mukherjee  
**Designation :** Resident Director  
**Mobile :** 9855243030  
**Email Id :** saibal.mukherjee@alembic.co.in

**SCHEDULE - II**  
**FORM - V**  
**PROFORMA FOR PRICE LIST**  
(See paragraphs 2(x),24,25,26)

1. Name and address of the manufacturer / importer / distributor : Alembic Pharmaceuticals Limited, Add :Alembic Road, Vadodara,Vadodara,Vadodara,Gujarat,390002
2. Name and address of the marketing company, if any : Alembic Pharmaceuticals Limited, Add :Alembic Road, Vadodara,Vadodara,Vadodara,Gujarat,390002

TABLE-A										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
	Imported Formulations									

  

TABLE-B										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Non-Scheduled formulations									
	Own Manufactured Formulations									
1	Althrocin 125 Mg Liquid 60 MI(60.00 MI) (Erythromycin LIQUID)	Erythromycin 125 MG LIQUID	60.00 ML	12.00	45.77	50.86	65.00	71.20	2408000707 & Jul-2024	200000
2	Althrocin 250 Mg Tablet 10(10.00 Tablet) (Erythromycin TABLET)	Erythromycin 250 MG TABLET	10.00 TABLET	12.00	43.65	48.50	62.00	67.90	2408000792 & Jul-2024	700000
3	Althrocin 500 Mg Tablet 10(10.00 Tablet) (Erythromycin TABLET)	Erythromycin 500 MG TABLET	10.00 TABLET	12.00	85.05	94.50	120.80	132.30	2408000839 & Jul-2024	300000
4	Atecard 25 Mg Tablet 14(14.00 Tablet) (Atenolol TABLET)	Atenolol 25 MG TABLET	14.00 TABLET	12.00	36.90	46.13	52.45	57.40	2408000652 & Jun-2024	9000
5	Atecard Am 50/5 Mg Tablet 15(15.00 Tablet) (Atenolol + Amlodipine TABLET)	Atenolol + Amlodipine 50/5 MG TABLET	15.00 TABLET	12.00	94.37	117.96	134.10	146.80	2408000597 & Jun-2024	4000
6	Cetaniil 10 Mg Tablet 15(15.00 Tablet) (Cilnidipine TABLET)	Cilnidipine 10 MG TABLET	15.00 TABLET	12.00	125.30	139.21	178.00	194.90	2408000675 & Jun-2024	130000
7	Cetaniil 5 Mg Tablet 15(15.00 Tablet) (Cilnidipine TABLET)	Cilnidipine 5 MG TABLET	15.00 TABLET	12.00	73.06	81.18	103.80	113.65	2408000641 & Jun-2024	20000
8	Glimser P 2/500/15 Mg Tablet 15(15.00 Tablet) (Glimepiride + Metformin + Pioglitazone TABLET)	Glimepiride + Metformin + Pioglitazone 2/500/15 MG TABLET	15.00 TABLET	12.00	188.42	209.36	267.70	293.10	2408000599 & Jun-2024	5000
9	Glz 60 Mg Tablet Xr 15(15.00 Tablet) (Gliclazide TABLET XR)	Gliclazide 60 MG TABLET XR	15.00 TABLET	12.00	161.19	179.11	229.00	250.75	2408000651 & Jun-2024	35000
10	Panplus 40 Mg Tablet 15(15.00 Tablet) (Pantoprazole TABLET)	Pantoprazole 40 MG TABLET	15.00 TABLET	12.00	73.35	81.50	104.20	114.10	2408000830 & Jul-2024	7500
11	Roxid 100 Mg Syrup 30 MI(30.00 MI) (Roxithromycin SYRUP)	Roxithromycin 100 MG SYRUP	30.00 ML	12.00	125.49	139.43	178.30	195.20	2408000715 & Jul-2024	3500
12	Telzly Am 80/5 Mg Tablet 15(15.00 Tablet) (Telmisartan + Amlodipine TABLET)	Telmisartan + Amlodipine 80/5 MG TABLET	15.00 TABLET	12.00	299.76	374.71	425.85	466.30	2408000604 & Jun-2024	6500
13	Telzly Ch 40/6.25 Mg Tablet 15(15.00 Tablet) (Telmisartan + Chlorthalidone TABLET)	Telmisartan + Chlorthalidone 40/6.25 MG TABLET	15.00 TABLET	12.00	168.17	186.86	238.90	261.60	2408000739 & Jul-2024	13000
14	Telzly Rs 40/10 Mg Tablet 15(15.00 Tablet) (Telmisartan + Rosuvastatin TABLET)	Telmisartan + Rosuvastatin 40/10 MG TABLET	15.00 TABLET	12.00	286.59	318.43	407.10	445.80	2408000576 & Jun-2024	10000
15	Tetan Trio 40/5/12.5 Mg Tablet 15(15.00 Tablet) (Telmisartan + Amlodipine + Hydrochlorothiazide TABLET)	Telmisartan + Amlodipine + Hydrochlorothiazide 40/5/12.5 MG TABLET	15.00 TABLET	12.00	209.31	232.57	297.35	325.60	2408000627 & Jun-2024	6500
16	Ulgel 400/20 Mg Tablet 8(8.00 Tablet) (Magaldrate + Simethicone TABLET)	Magaldrate + Simethicone 400/20 MG TABLET	8.00 TABLET	12.00	15.88	17.64	22.55	24.70	2408000724 & Jul-2024	20000
17	Urdiogem 300 Mg Tablet 10(10.00 Tablet) (Ursodeoxycholic Acid TABLET)	Ursodeoxycholic Acid 300 MG TABLET	10.00 TABLET	5.00	260.23	289.14	346.60	379.50	2408000798 & Jul-2024	4000
18	Vogo M 0.3/500 Mg Tablet 10(10.00 Tablet) (Voglibose + Metformin TABLET)	Voglibose + Metformin 0.3/500 MG TABLET	10.00 TABLET	12.00	140.27	175.34	199.30	218.20	2408000580 & Jun-2024	15000
	Purchased Formulations									
	Imported Formulations									

**Notes:-**In case of purchased/imported formulation, Name of the manufacturer shall be indicated.

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Place : Delhi

Date : 30-Aug-2024

Authorized Signatory : Saibal Mukherjee  
 Name : Saibal Mukherjee  
 Designation : Resident Director  
 Mobile : 9855243030  
 Email Id : saibal.mukherjee@alembic.co.in

**SCHEDULE - II**  
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**(See paragraphs 2(x),24,25,26)**

1. **Name and address of the manufacturer / importer / distributor :** Aurochem Laboratories (India Pvt. Ltd, Add :333,Gundecha Indl.Complex, Akurli Road,Kandivali(East), Mumbai-400101,Palghar,Mumbai,Maharashtra,400101
2. **Name and address of the marketing company, if any :** Alembic Pharmaceuticals Limited, Add :Alembic Road, Vadodara,Vadodara,Vadodara,Gujarat,390002

TABLE-A										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
	Imported Formulations									

TABLE-B										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Non-Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
1	Advan Cream 20 Gm(20.00 Gm) (Other Demelanising Agents CREAM)	Other Demelanising Agents NA CREAM	20.00 GM	18.00	520.47	578.31	775.00	853.00	EX4348002 & Jul-2024	0
2	Grocapix-M 5 % Syrup 60 MI(60.00 MI) (Minoxidil SYRUP)	Minoxidil 5 % SYRUP	60.00 ML	12.00	882.00	980.00	1253.00	1372.00	BX4747002 & Jul-2024	5300
	Imported Formulations									

**Notes:-**In case of purchased/imported formulation, Name of the manufacturer shall be indicated.

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Place : Delhi  
Date : 30-Aug-2024

**Authorized Signatory :** Saibal Mukherjee  
**Name :** Saibal Mukherjee  
**Designation :** Resident Director  
**Mobile :** 9855243030  
**Email Id :** saibal.mukherjee@alembic.co.in

**SCHEDULE - II**  
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**(See paragraphs 2(x),24,25,26)**

1. **Name and address of the manufacturer / importer / distributor :** Bharti Life Sciences & Linea Labs, Add :Premises No. 006, B Wing, 2nd Floor, Viral Apartment, S. V. Road, opp. Shoppers Stop,,Andheri west,Mumbai Suburban,Maharashtra,400058
2. **Name and address of the marketing company, if any :** Alembic Pharmaceuticals Limited, Add :Alembic Road, Vadodara,Vadodara,Vadodara,Gujarat,390002

TABLE-A										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
	Imported Formulations									

TABLE-B										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Non-Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
1	Aletol Ds Inj 100 MI(100.00 MI) (Tolfenamic Acid INJECTION)	Tolfenamic Acid 80 MG INJECTION(Each ml contains Tolfenamic Acid Ph.Eur 80mg Benzyl Alcohol IP 1.04%w/v (As preservative) Water for Injection IPqs)	100.00 ML	12.00	315.35	350.39	448.00	490.55	DW4695005 & Jun-2024	2400
	Imported Formulations									

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Date : 30-Aug-2024

**Authorized Signatory :** Saibal Mukherjee  
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**SCHEDULE - II**  
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(See paragraphs 2(x),24,25,26)

1. Name and address of the manufacturer / importer / distributor :

Exemed Pharmaceuticals, Add :1st floor, ABS Tower, Old Padra Padra, Vadodara-390007,Vadodara,Vadodara,Gujarat,390007

2. Name and address of the marketing company, if any :

Alembic Pharmaceuticals Limited, Add :Alembic Road, Vadodara,Vadodara,Vadodara,Gujarat,390002

TABLE-A										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
	Imported Formulations									

TABLE-B										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Non-Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
1	Sitalembic D 10/100 Mg Tablet 15(15.00 Tablet) (Dapagliflozin + Sitagliptin TABLET)	Dapagliflozin + Sitagliptin 10/100 MG TABLET	15.00 TABLET	12.00	161.87	179.86	229.95	251.80	FJ4908007 & Jul-2024	48000
2	Voage S 10/100 Mg Tablet 15(15.00 Tablet) (Dapagliflozin + Sitagliptin TABLET)	Dapagliflozin + Sitagliptin 10/100 MG TABLET	15.00 TABLET	12.00	161.87	179.86	229.95	251.80	FJ4909012 & Jul-2024	76500
	Imported Formulations									

**Notes:-**In case of purchased/imported formulation, Name of the manufacturer shall be indicated.

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Place : Delhi

Date : 30-Aug-2024

**Authorized Signatory :** Saibal Mukherjee  
**Name :** Saibal Mukherjee  
**Designation :** Resident Director  
**Mobile :** 9855243030  
**Email Id :** saibal.mukherjee@alembic.co.in

**SCHEDULE - II**  
**FORM - V**  
**PROFORMA FOR PRICE LIST**  
(See paragraphs 2(x),24,25,26)

1. **Name and address of the manufacturer / importer / distributor :** Lupin Limited, Add :Kalpatru Inspire, 3rd floor, off Western Express Highway, Santacruz(EAST), Mumbai 400055,Mumbai,Mumbai Suburban,Maharashtra,400055
2. **Name and address of the marketing company, if any :** Alembic Pharmaceuticals Limited, Add :Alembic Road, Vadodara,Vadodara,Vadodara,Gujarat,390002

TABLE-A										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
	Imported Formulations									
TABLE-B										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Non-Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
1	Rafle 550 Mg Tablet 10(10.00 Tablet) (Rifaximin TABLET)	Rifaximin 550 MG TABLET	10.00 TABLET	12.00	339.52	377.25	503.00	528.15	UA01575 & Jun-2024	4500
	Imported Formulations									

**Notes:-**In case of purchased/imported formulation, Name of the manufacturer shall be indicated.

The information furnished above is correct and true to the best of my knowledge and belief.

Place : Delhi

Date : 30-Aug-2024

**Authorized Signatory :** Saibal Mukherjee  
**Name :** Saibal Mukherjee  
**Designation :** Resident Director  
**Mobile :** 9855243030  
**Email Id :** saibal.mukherjee@alembic.co.in

**SCHEDULE - II**  
**FORM - V**  
**PROFORMA FOR PRICE LIST**  
(See paragraphs 2(x),24,25,26)

1. **Name and address of the manufacturer / importer / distributor :** Nitin Lifesciences Limited, Add :Rampur Ghat Road, Tehsil Paonta Sahib, Distt. Sirmour ( HP ) - 173025,Paonta Sahib,Sirmaur,Himachal Pradesh,173025
2. **Name and address of the marketing company, if any :** Alembic Pharmaceuticals Limited, Add :Alembic Road, Vadodara,Vadodara,Vadodara,Gujarat,390002

TABLE-A										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
	Imported Formulations									
TABLE-B										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Non-Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
1	Azithral 0.1 % Eye Drops 3 MI(3.00 MI) (Azithromycin EYE DROPS)	Azithromycin 0.1 % EYE DROPS	3.00 ML	12.00	115.71	144.64	165.00	180.00	AZ4685001 & Jun-2024	6000
	Imported Formulations									

**Notes:-**In case of purchased/imported formulation, Name of the manufacturer shall be indicated.

The information furnished above is correct and true to the best of my knowledge and belief.

Place : Delhi

Date : 30-Aug-2024

**Authorized Signatory :** Saibal Mukherjee  
**Name :** Saibal Mukherjee  
**Designation :** Resident Director  
**Mobile :** 9855243030  
**Email Id :** saibal.mukherjee@alembic.co.in

**SCHEDULE - II**  
**FORM - V**  
**PROFORMA FOR PRICE LIST**  
(See paragraphs 2(x),24,25,26)

1. Name and address of the manufacturer / importer / distributor : Softesule Pvt Ltd, Add :Plot No- 86-A, L.B.S.Marg, Mulund (W), Mumbai - 400 080,Mumbai,Mumbai,Maharashtra,400080
2. Name and address of the marketing company, if any : Alembic Pharmaceuticals Limited, Add :Alembic Road, Vadodara,Vadodara,Vadodara,Gujarat,390002

TABLE-A										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
	Imported Formulations									
TABLE-B										
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(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Non-Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
1	Gestofit 400 Mg Capsule 10(10.00 Capsule) (Natural Micronised Progesterone CAPSULE)	Natural Micronised Progesterone 400 MG CAPSULE	10.00 CAPSULE	12.00	427.76	475.29	607.70	665.40	BJ4100004 & Jul-2024	18500
	Imported Formulations									

**Notes:-**In case of purchased/imported formulation, Name of the manufacturer shall be indicated.

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Place : Delhi

Date : 30-Aug-2024

**Authorized Signatory :** Saibal Mukherjee  
**Name :** Saibal Mukherjee  
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**Mobile :** 9855243030  
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**SCHEDULE - II**  
**FORM - V**  
**PROFORMA FOR PRICE LIST**  
(See paragraphs 2(x),24,25,26)

1. **Name and address of the manufacturer / importer / distributor :** Synokem Pharmaceuticals Limited, Add :14/486, Basement & Ground Floor Outer Ring Road, Paschim Vihar, Sunder Vihar, Delhi, West, Delhi, 110087
2. **Name and address of the marketing company, if any :** Alembic Pharmaceuticals Limited, Add :Alembic Road, Vadodara, Vadodara, Vadodara, Gujarat, 390002

TABLE-A										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
	Imported Formulations									

TABLE-B										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Non-Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
1	Enzictra Ds 90/200/180/120 Mg Tablet 10(10.00 Tablet) (Trypsin + Rutoside + Bromelain + Papain TABLET)	Trypsin + Rutoside + Bromelain + Papain 90/200/180/120 MG TABLET	10.00 TABLET	12.00	365.34	405.93	519.00	568.30	EY4364005 & Jul-2024	15000
	Imported Formulations									

**Notes:-**In case of purchased/imported formulation, Name of the manufacturer shall be indicated.

The information furnished above is correct and true to the best of my knowledge and belief.

Place : Delhi

Date : 30-Aug-2024

**Authorized Signatory :** Saibal Mukherjee  
**Name :** Saibal Mukherjee  
**Designation :** Resident Director  
**Mobile :** 9855243030  
**Email Id :** saibal.mukherjee@alembic.co.in

**SCHEDULE - II**  
**FORM - V**  
**PROFORMA FOR PRICE LIST**  
(See paragraphs 2(x),24,25,26)

1. Name and address of the manufacturer / importer / distributor : Vapi Care Pharma Pvt. Ltd., Add :Plot no. 225/3, near Morarji Circle, GIDC, Vapi,Vapi,Valsad,Gujarat,396195
2. Name and address of the marketing company, if any : Alembic Pharmaceuticals Limited, Add :Alembic Road, Vadodara,Vadodara,Vadodara,Gujarat,390002

TABLE-A										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
	Imported Formulations									

TABLE-B										
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Price to Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Maximum Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Non-Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
1	Valembic H 80/12.5 Mg Tablet 10(10.00 Tablet) (Valsartan + Hydrochlorothiazide TABLET)	Valsartan + Hydrochlorothiazide 80/12.5 MG TABLET	10.00 TABLET	12.00	121.44	151.79	172.55	188.90	BR4729001 & Jul-2024	4000
	Imported Formulations									

**Notes:-**In case of purchased/imported formulation, Name of the manufacturer shall be indicated.

The information furnished above is correct and true to the best of my knowledge and belief.

Place : Delhi

Date : 30-Aug-2024

**Authorized Signatory :** Saibal Mukherjee  
**Name :** Saibal Mukherjee  
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