

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

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

Samarth Life Sciences Pvt Ltd, Add :HO Samarth House , Ram Mandir Rd ,Goregaon West,Mumbai,Mumbai,Maharashtra,400104

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

Samarth Life Sciences Pvt Ltd, Add :HO Samarth House , Ram Mandir Rd ,Goregaon West,Mumbai,Mumbai,Maharashtra,400104

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									
1	Nipress 50 Mg Injection 1(1.00 Vial) (Nitroprusside INJECTION)	Nitroprusside 50 MG INJECTION(Each vial contains Sodium Nitroprusside Dihydrate 50 mg)	1.00 VIAL	12.00	115.69	124.95	183	162.34	NA & Aug-2025	564000
	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									
	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 : Mumbai

Date : 05-Aug-25

Authorized Signatory : Poonam Deshmukh

Name : Poonam Deshmukh

Designation : Manager

Mobile : 9004398002

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