

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

1. Name and address of the manufacturer / importer / distributor : Gennova Biopharmaceuticals Ltd., Add :PLOT NO.P-1, I.T.B.T. PARK,PHASE II, MIDC,HINJAWADI,Pune,Maharashtra,411057
2. Name and address of the marketing company, if any : Gennova Biopharmaceuticals Ltd., Add :PLOT NO.P-1, I.T.B.T. PARK,PHASE II, MIDC,HINJAWADI,Pune,Maharashtra,411057

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	Vintor 10 000 Iu Pfs(1.00 No) (Erythropoietin PREFILLED SYRINGE)	Erythropoietin 10000 IU PREFILLED SYRINGE(Each pre-filled syringe Contains:Erythropoietin Concentrated Solution IP 10000 IU)	1.00 No	12.00	1442.43	1602.70	2205.4	2243.78	A082503V04 & May-2025	2070
2	Elaxim 30 Mg Injection 1(1.00 No) (Tenecteplase INJECTION)	Tenecteplase 30 MG INJECTION(Each Vial contains Recombinant Tissue Plasminogen Activator (TNK-t-PA) 30 mg.)	1.00 No	12.00	27037.68	30041.87	41339.21	42058.62	A122501E01 & May-2025	78
	Purchased Formulations									
1	Emval 450 Mg Tablet 4t(4.00 Tablet) (Valganciclovir TABLET)	Valganciclovir 450 MG TABLET(Each film coated tablet contains:Valganciclovir Hydrochloride IP equivalent to Valganciclovir 450 mg.)	4.00 TABLET	5.00	1174.18	1304.65	1683.06	1712.35	T-2505278 & May-2025	500
	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 : Pune

Date : 23-Jun-2025

Authorized Signatory : Suyog Harip
Name : Suyog Harip
Designation : Deputy General Manager
Mobile : 9370130082
Email Id : suyogh@emcure.com

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(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	Benfotabs(10.00 Tablet) (All Other Combinations TABLET)	All Other Combinations 200 MG TABLET (Each film coated tablet contains: Benfotiamine 200 mg Methylcobalamin IP 1500 mcg Alpha Lipoic Acid USP 200 mg Folic Acid IP 1.5 mg Chromium Picolinate USP 200 mcg Myo-Inositol BP 100 mg Pyridoxine Hydrochloride IP 3 mg.)	10.00 TABLET	12.00	243.74	270.82	345	379.15	EFH01AAA & May-2025	283800
	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 : Pune

Date : 23-Jun-2025

Authorized Signatory : Suyog Harip
Name : Suyog Harip
Designation : Deputy General Manager
Mobile : 9370130082
Email Id : suyogh@emcure.com