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

Biodeal Pharmaceuticals Limited, Add: VILLAGE SAINI MAJRA, NALAGARH, ROPAR ROAD, NALAGARH SOLAN, Solan, Himachal Pradesh, 174101

2. Name and address of the marketing company, if any : USV LIMITED, Add :ARVIND VITHAL GANDHI MARG, BSD MARG, GOVANDI, MUMBAI, Mumbai, Maharashtra, 400088

				TABLE-	١					
SI. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Distributor (excluding taxes)	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-	3					
SI. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Distributor	1	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	Cataspa 20/50 Mg Tablet 10(10.00 Tablet) (Dicyclomine + Diclofenac TABLET)	Dicyclomine + Diclofenac 20/50 MG TABLET	10.00 TABLET	12.00	30.54	33.93	-	47.50	2503024 & Mar-2025	16000000
	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: 18-Mar-2025

> Authorized Signatory : Nikhil Chugh Nikhil Chugh Name : Dy General Manager Designation : Mobile: 7400047289

nikhil.chugh@usv.in Email Id:

Name and address of the manufacturer / importer / distributor :

USV LIMITED, Add :ARVIND VITHAL GANDHI MARG, BSD MARG, GOVANDI, MUMBAI, Mumbai, Maharashtra, 400088

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

USV LIMITED, Add :ARVIND VITHAL GANDHI MARG, BSD MARG, GOVANDI, MUMBAI, Mumbai, Maharashtra, 400088

				TABLE-A	1					
SI. 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.)		any (incl.	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	1								
	Own Manufactured Formulations	1			ĺ					
	Purchased Formulations	1			ĺ				ĺ	
	Imported Formulations	ĺ	ĺ							
				TABLE-E	3	,	,			
					Price to	Price to	Pre-revised Maximum	waximum		
SI. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Distributor (excluding taxes) (Rs.)		Retail Price, if any (incl. of all taxes) (Rs.)	Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
		approved by Drug	Pack Size		(excluding taxes)	(excluding taxes)	Price, if any (incl. of all	Price (incl. of all taxes)	which price revision is	
No.	dosage forms)	approved by Drug Control Authorities		(in %)	(excluding taxes) (Rs.)	(excluding taxes) (Rs.)	Price, if any (incl. of all taxes) (Rs.)	Price (incl. of all taxes) (Rs.)	which price revision is effective	Capacity
No.	dosage forms) (2)	approved by Drug Control Authorities		(in %)	(excluding taxes) (Rs.)	(excluding taxes) (Rs.)	Price, if any (incl. of all taxes) (Rs.)	Price (incl. of all taxes) (Rs.)	which price revision is effective	Capacity
No.	dosage forms) (2) Non-Scheduled formulations	approved by Drug Control Authorities		(in %)	(excluding taxes) (Rs.)	(excluding taxes) (Rs.)	Price, if any (incl. of all taxes) (Rs.)	Price (incl. of all taxes) (Rs.)	which price revision is effective	Capacity
No.	(2) Non-Scheduled formulations Own Manufactured Formulations Ecosprin Av 10/75 Mg Capsule 15(15.00	approved by Drug Control Authorities (3) Atorvastatin + Aspirin	(4) 15.00	(in %) (5)	(excluding taxes) (Rs.)	(excluding taxes) (Rs.)	Price, if any (incl. of all taxes) (Rs.)	Price (incl. of all taxes) (Rs.)	which price revision is effective (10)	Capacity (11)

 $\underline{\textbf{Notes:-}} \textbf{In case of purchased/imported formulation, Name of the manufacturer shall be indicated.}$

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

Place : Mumbai

Date : 10-Mar-2025

Authorized Signatory : Nikhil Chugh
Name : Nikhil Chugh

Designation:

Dy General Manager

Mobile: 7400047289

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

SWISS GARNIER LIFE SCIENCES, Add :SKCL Central Square one, 1st Floor, South Wing, Thiru-Vi-Ka Industrial Estate,CHENNAI,Chennai,Tamil Nadu,600032

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

USV LIMITED, Add :ARVIND VITHAL GANDHI MARG, BSD MARG, GOVANDI, MUMBAI, Mumbai, Maharashtra, 400088

		-		TABLE-	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
SI. 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-	3					
SI. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Distributor	Price to retailer (excluding taxes) (Rs.)	any (incl.	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	Glycomet Gp 2/850 Mg Tablet 10(10.00 Tablet) (Glimepiride + Metformin TABLET)	Glimepiride + Metformin 2/850 MG TABLET	10.00 TABLET	12.00	69.56	77.29	-	108.20	121TGR058 & Feb-2025	100
	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 : 11-Mar-2025

Authorized Signatory: Nikhil Chugh

Name: Nikhil Chugh

Designation: Dy General Manager

Mobile: 7400047289

Email Id: nikhil.chugh@usv.in

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

Hetero Labs Limited, Add :Hetero Corporate, 7-2-A/2, Industrial Estate, Sanath Nagar,,Hyderabad,Ranga Reddy,Telangana,500018

2. Name and address of the marketing company, if any : USV LIMITED, Add :ARVIND VITHAL GANDHI MARG, BSD MARG, GOVANDI, MUMBAI, Mumbai, Maharashtra, 400088

				TABLE-A	١					
SI. 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.)	retailer (excluding taxes)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Price (incl. of all taxes)	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			ĺ		ĺ			
	Purchased Formulations	1			ĺ	ĺ	ĺ			
	Imported Formulations	ĺ			ĺ	ĺ	ĺ			
				TABLE-	3					
		1	1	1		1	Pre-revised	1	1	
SI. 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.)	Maximum Retail	Retail Price (incl. of all taxes)	Batch no. and date from which price revision is effective	Production Capacity
		approved by Drug			Distributor (excluding taxes)	retailer (excluding taxes)	Maximum Retail Price, if any (incl. of all	Retail Price (incl. of all taxes)	Batch no. and date from which price revision is	
No.	dosage forms)	approved by Drug Control Authorities	Size	(in %)	Distributor (excluding taxes) (Rs.)	retailer (excluding taxes) (Rs.)	Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Capacity
No.	dosage forms) (2)	approved by Drug Control Authorities	Size	(in %)	Distributor (excluding taxes) (Rs.)	retailer (excluding taxes) (Rs.)	Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Capacity
No.	dosage forms) (2) Non-Scheduled formulations	approved by Drug Control Authorities	Size	(in %)	Distributor (excluding taxes) (Rs.)	retailer (excluding taxes) (Rs.)	Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Capacity
No.	dosage forms) (2) Non-Scheduled formulations Own Manufactured Formulations	approved by Drug Control Authorities	Size	(in %)	Distributor (excluding taxes) (Rs.)	retailer (excluding taxes) (Rs.)	Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Capacity

 $\underline{\textbf{Notes:-}} \textbf{In case of purchased/imported formulation, Name of the manufacturer shall be indicated.}$

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

Place : Mumbai 03-Mar-2025 Date:

> Nikhil Chugh Authorized Signatory : Name : Nikhil Chugh Dy General

Designation: Manager Mobile : 7400047289

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

USV LIMITED, Add :ARVIND VITHAL GANDHI MARG, BSD MARG, GOVANDI, MUMBAI, Mumbai, Maharashtra, 400088

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

USV LIMITED, Add :ARVIND VITHAL GANDHI MARG, BSD MARG, GOVANDI, MUMBAI, Mumbai, Maharashtra, 400088

				TABLE-A	\					
SI. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	taxes)		Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Price (incl. of all taxes)	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-E	3					
SI. 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.)		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	Pioz V Tablets 15s(15.00 Tablet) (Pioglitazone TABLET)	Pioglitazone 15 MG TABLET(Pioglitazone 15 mg + Vildagliptin 50 mg)	15.00 TABLET	12.00	159.10	176.78	-	247.50	48020062 & Feb-2025	100000
	Purchased Formulations									
	Imported Formulations									

 $\underline{\textbf{Notes:-}} \textbf{In case of purchased/} \textbf{imported formulation, Name of the manufacturer shall be indicated.}$

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

Place: Mumbai

Date: 18-Mar-2025

Authorized Signatory: Nikhil Chugh
Name: Nikhil Chugh
Designation: Dy General Manager

Mobile: 7400047289

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

Windlas Biotech Limited, Add :40/1, Mohabewala Industrial Area, Dehradun, Dehradun, Uttarakhand, 248110

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

USV LIMITED, Add :ARVIND VITHAL GANDHI MARG, BSD MARG, GOVANDI, MUMBAI, Mumbai, Maharashtra, 400088

		•		TABLE-	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
SI. 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-	3					
SI. 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	Roseday Ez 40/10 Tablets 10s(10.00 Tablet) (Rosuvastatin + Ezetimibe TABLET)	Rosuvastatin + Ezetimibe 40/10 MG TABLET	10.00 TABLET	12.00	254.57	282.86	-	396.00	RDZ25001 & Feb-2025	100000
	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: 03-Mar-2025

 Authorized Signatory :
 Nikhil Chugh

 Name :
 Nikhil Chugh

 Designation :
 Dy General Manager

 Mobile :
 7400047289

 Email Id :
 nikhil.chugh@usv.in

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

MEPROMAX LIFESCIENCES PVT. LIMITED, Add :108 109 Dalamal Chambers New Marine Line MUMBAI,MUMBAI,Mumbai,Maharashtra,400020

2. Name and address of the marketing company, if any : USV LIMITED, Add :ARVIND VITHAL GANDHI MARG, BSD MARG, GOVANDI, MUMBAI, Mumbai, Maharashtra, 400088

				TABLE-A	1	,				
SI. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Distributor (excluding	(excluding	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-E	3					
	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	(excluding taxes)		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	Tazloc Beta 40/25 Mg Tablet 10(10.00 Tablet) (Telmisartan + Metoprolol TABLET)	Telmisartan + Metoprolol 40/25 MG TABLET	10.00 TABLET	12.00	132.43	147.14	-	206.00	TBF01 & Jan-2025	29000000
	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: 03-Mar-2025

> Authorized Signatory : Nikhil Chugh Nikhil Chugh Name : Dy General Manager Designation : Mobile: 7400047289

nikhil.chugh@usv.in Email Id:

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

390007, vadodara, vadodara, Gujarai, 39000

2. Name and address of the marketing company, if any: USV LIMITED, Add :ARVIND VITHAL GANDHI MARG, BSD MARG, GOVANDI,MUMBAI,Mumbai,Maharashtra,400088

				TABLE-	4					
SI. 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.)	retailer (excluding taxes)	Pre-revised Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Retail Price (incl. of all taxes)	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-	3					
SI. 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.)	Retail Price	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	Udapa Trio Forte Tablet(10.00 Tablet) (Dapagliflozin + Sitagliptin + Metformin TABLET)	Dapagliflozin + Sitagliptin + Metformin 10/100/1000 MG TABLET	10.00 TABLET	12.00	141.08	156.75	-	219.45	EMV250355B & Feb-2025	100000
	Imported Formulations									

 $\underline{\textbf{Notes:-}} \textbf{In case of purchased/imported formulation, Name of the manufacturer shall be indicated.}$

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

Place: Mumbai

Date: 11-Mar-2025

Authorized Signatory: Nikhil Chugh
Name: Nikhil Chugh
Designation: Dy General
Manager
Mobile: 7400047289

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 : USV LIMITED, Add :ARVIND VITHAL GANDHI MARG, BSD MARG, GOVANDI, MUMBAI, Mumbai, Maharashtra, 400088

				TABLE-A	4					
SI. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Distributor (excluding taxes)	(excluding	any (incl.	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-	3					
SI. 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.)	any (incl	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	Udapa Trio Tablet(10.00 Tablet) (Dapagliflozin + Sitagliptin + Metformin TABLET)	Dapagliflozin + Sitagliptin + Metformin 10/100/500 MG TABLET	10.00 TABLET	12.00	134.33	149.25	-	208.95	EMV250232 & Feb-2025	100000
	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 07-Mar-2025 Date:

Authorized Signatory : Nikhil Chugh Nikhil Chugh Name: Dy General Designation :

Mobile : 7400047289

Name and address of the manufacturer / importer / distributor :

USV LIMITED, Add :ARVIND VITHAL GANDHI MARG, BSD MARG, GOVANDI, MUMBAI, Mumbai, Maharashtra, 400088

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

USV LIMITED, Add :ARVIND VITHAL GANDHI MARG, BSD MARG, GOVANDI, MUMBAI, Mumbai, Maharashtra, 400088

				TABLE-A	1					
SI. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Distributor (excluding taxes)	retailer	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-E	3					
SI. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Distributor (excluding taxes)	Price to retailer (excluding taxes) (Rs.)	any (incl.	Retail Price (incl. of all taxes)	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	Vobose 0.2 Mg Tablet 10(10.00 Tablet) (Voglibose TABLET)	Voglibose 0.2 MG TABLET	10.00 TABLET	12.00	79.88	88.75	-	124.25	28026280 & Feb-2025	6000000
	Purchased Formulations									
	Imported Formulations									

 $\underline{\textbf{Notes:-}} \textbf{In case of purchased/imported formulation, Name of the manufacturer shall be indicated.}$

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

Place: Mumbai

Date: 03-Mar-2025

Authorized Signatory : Nikhil Chugh
Name : Nikhil Chugh
Designation : Dy General

Manager Mobile: 7400047289

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 : USV LIMITED, Add :ARVIND VITHAL GANDHI MARG, BSD MARG, GOVANDI, MUMBAI, Mumbai, Maharashtra, 400088

	ane and address of the marketing company	, ii diiy . OOV Liiv	,							
				TABLE-	4					
	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.)		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-	3					
					Price to		Pre-revised	Maximum		
SI. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate (in %)	Distributor (excluding taxes) (Rs.)	Price to retailer (excluding taxes) (Rs.)	Maximum Retail Price, if any (incl. of all taxes) (Rs.)	Retail Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Production Capacity
		approved by Drug			Distributor (excluding taxes)	retailer (excluding taxes)	Retail Price, if any (incl. of all	Price (incl. of all taxes)	Batch no. and date from which price revision is	Production Capacity (11)
No.	dosage forms)	approved by Drug Control Authorities	Size	(in %)	Distributor (excluding taxes) (Rs.)	retailer (excluding taxes) (Rs.)	Retail Price, if any (incl. of all taxes) (Rs.)	Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Capacity
No.	dosage forms) (2)	approved by Drug Control Authorities	Size	(in %)	Distributor (excluding taxes) (Rs.)	retailer (excluding taxes) (Rs.)	Retail Price, if any (incl. of all taxes) (Rs.)	Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Capacity
No.	dosage forms) (2) Non-Scheduled formulations	approved by Drug Control Authorities	Size	(in %)	Distributor (excluding taxes) (Rs.)	retailer (excluding taxes) (Rs.)	Retail Price, if any (incl. of all taxes) (Rs.)	Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Capacity
(1)	dosage forms) (2) Non-Scheduled formulations Own Manufactured Formulations	approved by Drug Control Authorities	Size	(in %)	Distributor (excluding taxes) (Rs.)	retailer (excluding taxes) (Rs.)	Retail Price, if any (incl. of all taxes) (Rs.)	Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective	Capacity
(1)	(2) Non-Scheduled formulations Own Manufactured Formulations Purchased Formulations Xenia M 500 Mg 10s(10.00 Tablet)	approved by Drug Control Authorities (3) Empagliflozin + Metformin 12.5/500	(4)	(in %)	Distributor (excluding taxes) (Rs.)	retailer (excluding taxes) (Rs.)	Retail Price, if any (incl. of all taxes) (Rs.)	Price (incl. of all taxes) (Rs.)	Batch no. and date from which price revision is effective (10)	(11)

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: 17-Mar-2025

> Authorized Signatory : Nikhil Chugh Nikhil Chugh Name : Dy General Manager Designation : Mobile: 7400047289

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