

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

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

Makers Laboratories Limited, Add :Plot No. 54-D, Kandivli Industrial Estate, Charkop, Kandivli (West), Mumbai, Mumbai Suburban, Maharashtra, 400067

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

Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West), Mumbai, Mumbai Suburban, Maharashtra, 400067

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									
1	Omihalt 2ml Injection(2.00 MI) (INJECTION)	Ondansetron 2 MG INJECTION(Each ml contains : Ondansetron Hydrochloride IP equivalent to Ondansetron 2mg Water for Injection IP q.s.)	2.00 ML	12.00	8.59	9.54	13.35	13.35	KJW014001D & Jul-2024	24000
	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 : 06-Sep-2024

Authorized Signatory : Sunil Kamath
Name : Sunil Kamath
Designation : Vice President Finance
Mobile : 9323138762
Email Id : sunil.kamath@ipca.com

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

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

OASIS LABORATORIES PVT. LTD., Add :E-18, SELAQUI INDUSTRIAL AREA, SELAQUI DEHRADUN ,DEHRADUN,Dehradun,Uttarakhand,248197

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

Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West),Mumbai,Mumbai Suburban,Maharashtra,400067

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									
1	Periset 2 Mg Syrup 30 MI(30.00 MI) (SYRUP)	Ondansetron 2 MG SYRUP	30.00 ML	12.00	27.22	30.24	42.34	42.34	EUT114002AM & Apr-2024	100000
	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.

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Place : Mumbai

Date : 06-Sep-2024

Authorized Signatory : Sunil Kamath
Name : Sunil Kamath
Designation : Vice President Finance
Mobile : 9323138762
Email Id : sunil.kamath@ipca.com

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

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

PURE AND CURE HEALTHCARE PVT. LTD., Add :PLOT NO. 131 TO 133, BLOCK -C, MANGOLPURI IND. AREA, PHASE - I (ADJOINING CBSE OFFICE),DELHI,New Delhi,Delhi,110083

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

Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West),Mumbai,Mumbai Suburban,Maharashtra,400067

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
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	Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
1	Epictal 250 Mg Tablet 10(10.00 No) (TABLET)	Levetiracetam 250 MG TABLET	10.00 No	12.00	45.36	50.40	70.56	70.56	PJRBZ03 & Jul-2024	10000
	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
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	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 : 06-Sep-2024

Authorized Signatory : Sunil Kamath
Name : Sunil Kamath
Designation : Vice President Finance
Mobile : 9323138762
Email Id : sunil.kamath@ipca.com

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

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

Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West),Mumbai,Mumbai Suburban,Maharashtra,400067

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Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West),Mumbai,Mumbai Suburban,Maharashtra,400067

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	Scheduled formulations									
	Own Manufactured Formulations									
1	Revelol XI 25 Mg Tablet 15(15.00 No) (TABLET ER)	Metoprolol 25 MG TABLET ER	15.00 No	12.00	45.90	51.00	70.56	71.40	IAN044006BH & Jun-2024	210000
2	Vinicor XI 25 Mg Tablet XI 10(10.00 No) (TABLET ER)	Metoprolol 25 MG TABLET ER	10.00 No	12.00	30.60	34.00	47.04	47.60	IAO044004BH & Jul-2024	100000
	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									

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Place : Mumbai

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Authorized Signatory : Sunil Kamath
Name : Sunil Kamath
Designation : Vice President Finance
Mobile : 9323138762
Email Id : sunil.kamath@ipca.com

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(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Scheduled formulations									
	Own Manufactured Formulations									
1	Pacimol 120 Mg Suspension 60 MI(60.00 MI) (SUSPENSION)	Paracetamol 120 MG SUSPENSION	60.00 ML	12.00	26.35	29.28	40.99	40.99	IMW034003R & Jul-2024	120000
	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.

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Place : Mumbai

Date : 06-Sep-2024

Authorized Signatory : Sunil Kamath
Name : Sunil Kamath
Designation : Vice President Finance
Mobile : 9323138762
Email Id : sunil.kamath@ipca.com

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

Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West),Mumbai,Mumbai Suburban,Maharashtra,400067

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	Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
	Imported Formulations									

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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	Glycinorm 80 Mg Tablet 15(15.00 No) (TABLET)	Gliclazide 80 MG TABLET	15.00 No	12.00	105.39	117.10	149.10	163.95	EKK084004AS & Jul-2024	80000
2	Revelol Am 50/5 Mg Tablet 15(15.00 No) (TABLET MR)	Metoprolol + Amlodipine 50/5 MG TABLET MR	15.00 No	12.00	165.80	184.22	234.55	257.90	JKN014006AS & Jul-2024	150000
	Purchased Formulations									
	Imported Formulations									

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

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

Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West),Mumbai,Mumbai Suburban,Maharashtra,400067

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Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West),Mumbai,Mumbai Suburban,Maharashtra,400067

TABLE-A										
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	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	Solvin Cold 125/5/2 Mg Syrup 60 MI(60.00 MI) (SYRUP)	Paracetamol + Phenylephrine + Chlorpheniramine 125/5/2 MG SYRUP	60.00 ML	12.00	54.90	61.00	77.65	85.40	HWV054012R & Sep-2024	400000
	Purchased Formulations									
	Imported Formulations									

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

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Place : Mumbai

Date : 20-Sep-2024

Authorized Signatory : Sunil Kamath
Name : Sunil Kamath
Designation : Vice President Finance
Mobile : 9323138762
Email Id : sunil.kamath@ipca.com

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

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 :

Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West),Mumbai,Mumbai Suburban,Maharashtra,400067

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
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	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	Foloup 100 Mg Tablet Dt 10(10.00 No) (TABLET DT)	Cefpodoxime 100 MG TABLET DT	10.00 No	12.00	97.11	107.90	137.40	151.05	FT240804 & Aug-2024	30000
	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 : 20-Sep-2024

Authorized Signatory : Sunil Kamath
Name : Sunil Kamath
Designation : Vice President Finance
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Email Id : sunil.kamath@ipca.com

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

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

Ravenbhel Healthcare Private Limited, Add :16-17, EPIP ,SIDCO,Kartholi,,Bari Brahmana,Jammu,Jammu And Kashmir,181133

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

Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West),Mumbai,Mumbai Suburban,Maharashtra,400067

TABLE-A										
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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	Ctd Mt 12.5/50/40 Mg Tablet 10(10.00 No) (TABLET ER)	Telmisartan + Chlorthalidone + Metoprolol 40/12.5/50 MG TABLET ER	10.00 No	12.00	112.34	124.82	158.95	174.75	FIIF2403 & Jun-2024	11300
	Imported Formulations									

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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 :

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 :

Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West),Mumbai,Mumbai Suburban,Maharashtra,400067

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	Non-Scheduled formulations									
	Own Manufactured Formulations									
	Purchased Formulations									
1	Bdiff A Gel(15.00 Gm) (GEL)	Adapalene+ Benzoyl Peroxide 0.1/2.5 % GEL	15.00 GM	12.00	311.75	346.39	441.00	484.95	H438 & Aug-2024	10000
	Imported Formulations									

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

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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 :

ACME FORMULATION PVT. LIMITED, Add :VILLAGE GHOGARWAL ROPAR ROAD ,NALAGARH,Solan,Himachal Pradesh,174101

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

Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West),Mumbai,Mumbai Suburban,Maharashtra,400067

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	Rinosolvin 10/5 Mg Tablet 10(10.00 No) (TABLET)	Montelukast + Levocetirizine 10/5 MG TABLET	10.00 No	12.00	106.17	117.97	150.20	165.15	IPCAD24004 & Jul-2024	30000
	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 : 20-Sep-2024

Authorized Signatory : Sunil Kamath
Name : Sunil Kamath
Designation : Vice President Finance
Mobile : 9323138762
Email Id : sunil.kamath@ipca.com

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

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

Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West),Mumbai,Mumbai Suburban,Maharashtra,400067

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

Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West),Mumbai,Mumbai Suburban,Maharashtra,400067

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	Inosert 100 Mg Tablet 10(10.00 No) (TABLET)	Sertraline 100 MG TABLET	10.00 No	12.00	125.01	138.90	176.85	194.45	GPB014005AK & Aug-2024	20000
2	Leset 5 Mg Tablet 10(10.00 No) (TABLET)	Levocetirizine 5 MG TABLET	10.00 No	12.00	73.22	81.36	103.60	113.90	DNO034003AK & Aug-2024	10000
3	Quel Sr 200 Mg Tablet 10(10.00 No) (TABLET MR)	Quetiapine 200 MG TABLET MR	10.00 No	12.00	143.59	159.54	212.75	223.35	JUC014003AK & Aug-2024	10000
4	Quel Sr 300 Mg Tablet 10(10.00 No) (TABLET MR)	Quetiapine 300 MG TABLET MR	10.00 No	12.00	208.60	231.78	303.15	324.50	JUD034003AK & Aug-2024	10000
5	Quel Sr 400 Mg Tablet 10(10.00 No) (TABLET MR)	Quetiapine 400 MG TABLET MR	10.00 No	12.00	262.64	291.82	371.55	408.55	JUE014004AK & Aug-2024	10000
6	Quel 100 Mg Tablet 10(10.00 No) (TABLET)	Quetiapine 100 MG TABLET	10.00 No	12.00	76.89	85.43	108.80	119.60	DQU054004AK & Aug-2024	10000
7	Etova Er 600 Mg Tablet Er 10(10.00 No) (TABLET MR)	Etodolac 600 MG TABLET MR	10.00 No	12.00	170.49	189.43	241.20	265.20	IOC014006AK & Jul-2024	90000
8	Metagard Cr 35 Mg Tablet 10(10.00 No) (TABLET CR)	Trimetazidine 35 MG TABLET CR	10.00 No	12.00	119.57	132.86	169.15	186.00	AJA084004AK & Aug-2024	30000
9	Glyree M 2/500 Mg Tablet Er 10(10.00 No) (TABLET MR)	Glimepiride + Metformin 2/500 MG TABLET MR	10.00 No	12.00	113.37	125.97	160.40	176.35	IMN014002AK & Aug-2024	80000
10	Pacimol Mf 500/325 Mg Tablet 10(10.00 No) (TABLET)	Mefenamic Acid + Paracetamol 500/325 MG TABLET	10.00 No	12.00	31.37	34.86	45.60	48.80	JAF014004AK & Aug-2024	90000
	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 : 20-Sep-2024

Authorized Signatory : Sunil Kamath
Name : Sunil Kamath
Designation : Vice President Finance
Mobile : 9323138762
Email Id : sunil.kamath@ipca.com

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 :

Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West), Mumbai, Mumbai Suburban, Maharashtra, 400067

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	Ctd-C 10/12.5 Mg Tablet 10(10.00 No) (TABLET)	Cilnidipine + Chlorthalidone 10/12.5 MG TABLET	10.00 No	12.00	101.19	112.43	143.15	157.40	24S2GTC185 & Aug-2024	20000
	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 : 20-Sep-2024

Authorized Signatory : Sunil Kamath
Name : Sunil Kamath
Designation : Vice President Finance
Mobile : 9323138762
Email Id : sunil.kamath@ipca.com

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

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

LYKA LABS LIMITED, Add :Spencer Building, Ground Floor, 30 Forjett Street, Tardeo, Grant Road West ,Mumbai,Mumbai,Maharashtra,400036

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

Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West),Mumbai,Mumbai Suburban,Maharashtra,400067

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	Halotop 0.05 % Lotion 50 MI(50.00 MI) (LOTION)	Halobetasol 0.05 % LOTION	50.00 ML	12.00	233.13	259.03	329.80	362.65	IC25 & Aug-2024	10000
	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 : 20-Sep-2024

Authorized Signatory : Sunil Kamath
Name : Sunil Kamath
Designation : Vice President Finance
Mobile : 9323138762
Email Id : sunil.kamath@ipca.com

SCHEDULE - II
FORM - V
PROFORMA FOR PRICE LIST
(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 :

Ipca Laboratories Limited, Add : Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West),Mumbai,Mumbai Suburban,Maharashtra,400067

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	Depitrip-M 10/500mg Tablets(10.00 No) (Dapagliflozin + Metformin TABLET ER)	Dapagliflozin + Metformin 10/500 MG TABLET ER	10.00 No	12.00	80.36	89.29	-	125.00	EMV241740B & Aug-2024	11200
2	Depitrip-M 10/1000mg Tablets(10.00 No) (Dapagliflozin + Metformin TABLET ER)	Dapagliflozin + Metformin 10/1000 MG TABLET ER	10.00 No	12.00	93.21	103.57	-	145.00	EMV241757A & Aug-2024	7000
	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 : 20-Sep-2024

Authorized Signatory : Sunil Kamath
Name : Sunil Kamath
Designation : Vice President Finance
Mobile : 9323138762
Email Id : sunil.kamath@ipca.com

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

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

Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West),Mumbai,Mumbai Suburban,Maharashtra,400067

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

Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West),Mumbai,Mumbai Suburban,Maharashtra,400067

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	Lariago 250 Mg Tablet 10(10.00 No) (Chloroquine TABLET)	Chloroquine 250 MG TABLET	10.00 No	5.00	9.58	10.64	12.29	13.97	C6044034AK & Sep-2024	2870000
	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 : 16-Sep-2024

Authorized Signatory : Sunil Kamath
Name : Sunil Kamath
Designation : Vice President Finance
Mobile : 9323138762
Email Id : sunil.kamath@ipca.com

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

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

LYKA LABS LIMITED, Add : Spencer Building, Ground Floor, 30 Forjett Street, Tardeo, Grant Road West, Mumbai, Mumbai, Maharashtra, 400036

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

Ipca Laboratories Limited, Add : Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West), Mumbai, Mumbai Suburban, Maharashtra, 400067

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									
1	Leup XI 22.5mg Injection(1.00 Vial) (Leuporelin INJECTION)	Leuporelin 22.5 MG INJECTION(Each Combi pack contains a. One vial of Leuprolide Acetate for Injection (Depot) 22.5mg Each vial contains Leuprolide Acetate USP 22.5mg Excipients q.s. b. Diluents for Leuprolide Acetate for Injection (Depot) 3ml Each ml contains Sodium Carboxymethylcellulose IP 5mg Mannitol IP 50mg Polysorbate 80 IP 1mg Water for Injection IP q.s. c. Sterile Hypodermic 3ml syringe for single use only d. Sterile Hypodermic Needles for single use only)	1.00 VIAL	12.00	8261.16	9179.07	12850.00	12850.70	LDC112 & Jun-2024	10000
	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 : 20-Sep-2024

Authorized Signatory : Sunil Kamath
Name : Sunil Kamath
Designation : Vice President Finance
Mobile : 9323138762
Email Id : sunil.kamath@ipca.com