

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

1. Name & address of the manufacturer / importer / distributor : CENTAUR PHARMACEUTICALS PRIVATE LIMITED, Add :CENTAUR HOUSE, NEAR GRAND HYATT, VAKOLA, SANTACRUZ (E)
2. Name & address of the marketing company, if any : CENTAUR PHARMACEUTICALS PRIVATE LIMITED, Add :CENTAUR HOUSE, NEAR GRAND HYATT, VAKOLA, SANTACRUZ (E)

TABLE-A						
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition Approved By Drug Control Authorities	Pack Size	Price to Stockist (inclusive of E.D) (Rs.)	Price to Retailer (inclusive of E.D) (Rs.)	Maximum Retail Price (inclusive of E.D & Taxes) (Rs.)
(1)	(2)	(3)	(4)	(5)	(6)	(7)
	Scheduled formulation					
	Own Manufacture Formulation					
1	Bactirest 2 % Cream 5 Gm(5.00 Gm) (Fusidic Acid CREAM)	Fusidic Acid 2 % CREAM	5	38.95	42.34	49.11
2	Bactirest 2 % Cream 10 Gm(10.00 Gm) (Fusidic Acid CREAM)	Fusidic Acid 2 % CREAM	10	67.66	73.54	85.31
3	Benzox Ac 2.5 % Cream 20 Gm(20.00 Gm) (Benzoyl Peroxide CREAM)	Benzoyl Peroxide 2.5 % CREAM	20	57.38	62.37	72.35
4	Cipro Cent Ointment(5.00 Gm) (Ciprofloxacin EYE OINTMENT)	Ciprofloxacin 0.3 % EYE OINTMENT	5	5.11	5.56	6.44
5	Eye Vir(5.00 Gm) (Aciclovir EYE OINTMENT)	Aciclovir 3 % EYE OINTMENT	5	46.23	50.25	58.30
TABLE-B						
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition Approved By Drug Control Authorities	Pack Size	Price to Stockist (inclusive of E.D) (Rs.)	Price to Retailer (inclusive of E.D) (Rs.)	Maximum Retail Price (inclusive of E.D & Taxes) (Rs.)
(1)	(2)	(3)	(4)	(5)	(6)	(7)
	Non-Scheduled formulation					
	Own Manufactured Formulation					
	Purchased/Imported Formulation					

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 : 27-Feb-2023

Authorized Signatory : DR AMIT RANGNEKAR

Name : DR AMIT RANGNEKAR

Designation : VP SCM