

**SCHEDULE - II
FORM - II**

Form Ref No.: Ref/IPDMS/Form/2/3 Date: 06-Jun-2024

**PROFORMA FOR SUBMISSION OF REVISED-PRICES FOR SCHEDULED FORMULATIONS
(See paragraph 16)**

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

Pharma Synth Formulations Ltd., Add :A 10 15, JHILMIL INDUSTRIAL AREA DELHI. ,DELHI,East,Delhi,110095

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

Pharma Synth Formulations Ltd., Add :A 10 15, JHILMIL INDUSTRIAL AREA DELHI. ,DELHI,East,Delhi,110095

Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition as approved by Drug Control Authorities	Pack Size	GST rate in %	WPI change w.r.t preceding year in %	Price to retailer per pack (excluding taxes) (Rs.)		Maximum Retail Price (incl. of all taxes) (Rs.)		Notified Ceiling Price (in Rs., excluding taxes)	Batch No. and date from which price revision is effective
						Pre-Revised	Revised	Pre-Revised	Revised		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
	Scheduled formulations										
	Own Manufactured Formulations										
1	Vitalyte Ors Powder 21 Gm(21.00 Gm) (Dextrose Anhydrous + Potassium Chloride + Sodium Chloride + Sodium Citrate POWDER)	Dextrose Anhydrous + Potassium Chloride + Sodium Chloride + Sodium Citrate 13.5/1.5/2.6/2.9 GM POWDER	21.00 GM	5.00	0.005510	18.40	16.63	24.15	21.83	20.79	Not available & May-2024
2	Vitalyte Ors Powder 4.2 Gm(4.20 Gm) (Dextrose Anhydrous + Potassium Chloride + Sodium Chloride + Sodium Citrate POWDER)	Dextrose Anhydrous + Potassium Chloride + Sodium Chloride + Sodium Citrate 13.5/1.5/2.6/2.9 GM POWDER	4.20 GM	5.00	0.005510	3.67	3.32	4.82	4.36	4.16	Not available & May-2024
	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 : Delhi

Date : 06-Jun-0024

Authorized Signatory : Ramesh Chand Jain
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