

## Quarterly return for manufacture and sale of Formulations of Codeine Phosphate

Return for the quarter ending on.....

1. Name and address of Manufacturer:.....
2. Name of narcotic Drug: .....
3. Details of Manufacturing & Sales:.....

### Details of Manufacturing & Sales during the quarter:

Sl. No.	Name of the formulation of Narcotic Drug	Type of the formulation (Tablets / Syrup/ Amps./ vials etc)	Strength of Narcotic Drug in the formulation	Opening Balance of the formulation with its Batch No. at the beginning of the quarter	Quantity of formulations procured with their Batch No. details during the quarter			Total quantity of formulations manufactured with Batch No. details of each formulation during the quarter	Total Stock of formulations with Batch No. details during the quarter (Col. 5+8+9)	Total quantity of Batchwise formulation Sold	Date of selling	Sold in Domestic Market or Exported?	Details of the Consignee to whom the preparation has been sold					Sale Invoice Number	Closing Balance of the formulation with Batch No. (Col. 10-11)
					From domestic market	From import	Total receipts						Name	Complete address	Brand Name with Batch details sold	State/ Country	Contact No.		
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20

Certified that the information given above is correct and the relevant records are available with me/ us.

Date.....

Seal and Signature of Authorized signatory

Name: .....

Designation: .....

Mob. No: .....

**Note:** - This quarterly return should be self-authenticated by the authorized signatory with Seal of the applicant company.