**FORM No. 11**

***[see rule 10(3)]***

***INVOICE OR WARRANTY***

Invoice no…………………………………………dated…………………………..20…………………..

to M/s………………………………………………….situated at …………………………………….……

It is certified that I Mr.………………………………………………………………..s/o Mr.…………………………………….having NIC No…………………..………………….being manufacturer or importer or (authorized agent *vide* authority letter No………………………………….….dated……………………………………….…on behalf of M/s………………………………………………………………………………………………………….)

1. It is hereby certified that following finished products have been supplied by me, namely:-

|  |  |
| --- | --- |
| **S. No.** | **Total No. of items sold.**  |
|  | **Name of product and pack size**  | **Batch number** **(or lot No.)**  | **No. of units sold**  | **Distribution price**  | **Retail price**  |

**Grant total…………………………**

2. It is hereby certified and I undertake that above mentioned finished products of specified batch number (or lot number) supplied by me do not contravene any provision of the DRAP Act, 2012 and rules framed there under. The authorized agent (with valid distribution authority letter) shall pass on this warranty to the retailers in his area of jurisdiction during the supply of medicine and health products.

a.…………………..

b.…………………..

*Date.....…………………………………………..……… Signature…………………………………….…..*

*Place ......................................................................... Designation………………..…………………..*

*Seal of manufacture or /importer*