| | Annexure-9 | | | | | | | | | | | | | |
|--------|------------------------------------------------------------------------------------|---------------------------|--|---------------------------|-----------------|-----------------------------------------------|---------------------------------|------------------------|------------|------------|-----------|-----------------|-----------------|--|
| | Name of the corporate debtor: RAMAKRISHNA HOMEO PHARMACEUTICALS PVT LTD | | | | | | | | | | | | | |
| | Date of commencement of CIRP: 10-01-2024(Copy made on Available 16-01-2024) | | | | | | | | | | | | | |
| | List of creditors as on:11-04-2024 | | | | | | | | | | | | | |
| | List of other creditors (Other than financial creditors and operational creditors) | | | | | | | | | | | | | |
| | (Amount in₹) | | | | | | | | | | | | | |
| | Name of creditor | Details of claim received | | Details of claim admitted | | | | | Amount of | Amount of | | | | |
| S1. No | | | | | | | | | contingent | any mutual | Amount of | Amount of claim | | |
| | | Date of receipt | | Amount of claim admitted | Nature of claim | Amount co vered by Security interest | Amount co vered by guarantee | Whether related party? | | | | | Remarks, if any | |
| | | | | Nil | | | | | | | | | | |
| | | | | | | | | • | | | | | | |