

Annexure-9**Name of the corporate debtor: M/s Jaisanshu Medicare Private Limited.; Date of c****List of other creditors (Other than financial cr**

Sl. No.	Name of creditor	Details of claim received		Details of claim			
		Date of receipt	Amount claimed	Amount of claim admitted	Nature of claim	Amount covered by security interest	Amount covered by guarantee
-	NA	NA	NA	NA	NA	NA	NA
	Total			0	0		

ommencement of CIRP: 30.06.2026; List of creditors as on: 01.10.2026

editors and operational creditors)

1 admitted	Amount of contingent claim	Amount of any mutual dues, that may be set-off	Amount of claim not admitted	Amount of claim under verificati on	Remarks, if any
Wheth er related party?					
NA	NA	NA		NA	NA
0			0	0	