

Name of the Corporate Debtor: MOWKISH HEALTHCARE SOLUTIONS PRIVATELIMITED; Date of Commencement of CIRP: 16-01-2025; List of Creditors as on: 11-02-2025; Name of IP: ; Process Number: 1; Last 5 digit of registration number:

[\(Please click here for previous Lists of Creditors\)](#)

(Filing under clause (ca) of sub-regulation (2) of regulation 13 the IBBI (Insolvency Resolution Process for Corporate Persons) Regulations, 2016

Sl. No.	Category of Creditor	Summary of Claims Received		Summary of Claims Admitted			Amount of Contingent Claims	Amount of Claim Not Admitted	Amount of Claims under Verification	Details in Annexure (Only PDF)
		No. of Claims	Amount	No. of Claims	Amount	% Share in Total Amount of Claims Admitted				
1	Secured financial creditors belonging to any class of creditors	0	0	0	0	0.00	0	0	0	NA
2	Unsecured financial creditors belonging to any class of creditors	0	0	0	0	0.00	0	0	0	NA
3	Secured financial creditors (other than financial creditors belonging to any class of creditors)	0	0	0	0	0.00	0	0	0	NA
4	Unsecured financial creditors (other than financial creditors belonging to any class of creditors)	1	160222712	1	160222712	100.00	0	0	0	<a href="#">Annexure 4</a>
5	Operational creditors (Workmen)	0	0	0	0	0.00	0	0	0	NA
6	Operational creditors (Employees)	0	0	0	0	0.00	0	0	0	NA
7	Operational creditors (Government Dues)	0	0	0	0	0.00	0	0	0	NA
8	Operational creditors (other than Workmen and Employees and Government Dues)	0	0	0	0	0.00	0	0	0	NA
9	Other creditors, if any, (other than financial creditors and operational creditors)	0	0	0	0	0.00	0	0	0	NA
<b>Total</b>		<b>1</b>	<b>160222712</b>	<b>1</b>	<b>160222712</b>	<b>100.00</b>	<b>0</b>	<b>0</b>	<b>0</b>	