# Quarterly Return Form (Manufacturers of Preparations)

**Registration No.**

**Quarter (mm/yyyy)**

**Following Details to be furnished for each used substance**

**Substance Name**

**Opening balance (Bulk Drug)**

**Opening balance (consolidated quantity) : (Preparation)**

**Procurement Details : (Bulk Drug)**

| Transaction Details with parties registered/to be registered with CBN (Date wise Party Wise) | | | | | | | |
|---|---|---|---|---|---|---|---|
| Sr. No. | Date | Quantity | CBN Registration No. | If CBN Registration No. Not Available | | | |
| | | | | Name | Address | State | District |
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| Transaction Details with parties for Import (Date wise Party Wise) | | | |
|---|---|---|---|
| Sr. No. | Date | Quantity | CBN Import/Export Authorisation No. |
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| Consolidated details | | | | | |
|---|---|---|---|---|---|
| Production | | | | | |
| Sr. No. | Type of Substance (Psychotropic / Non Psychotropic) | Trade Name | Amount of Salt/Unit (Mg.) | Unit | Quantity in Kgs. |
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| **Process Loss** |  |  |  |  |
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| **Other Losses** |  |  |  |  |
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|  |  |  |  |  |
| **Destruction of Expired goods at Own Premises** |  |  |  |  |
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| **Used for Research** |  |  |  |  |
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|  |  |  |  |  |
| **Used for Testing/Quality Control** |  |  |  |  |
|  |  |  |  |  |
| **Given out as sample** |  |  |  |  |
|  |  |  |  |  |

**Sale Details : (Preparation)**

| Details of transactions with parties other than those to be registered with CBN (Consolidated Transaction Party wise and Trade Name Wise) | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Sr. No. | Trade Name | Amount of salt/unit (mg.) | Unit | Quantity (In Kgs.) | Party Type (Doctor/ Retailer / Hospital/ Institutional Supplier/ Govt. Supplier) | Name | Address | State | District |
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| Transaction Details with parties registered/to be registered with CBN (Date wise Party Wise) | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Sr. No. | Transaction Type (Domestic procurement/ Sale / Returned/ Received back) | Date | Trade Name | Amount of salt/ unit (mg.) | No. of Units | Quantity | CBN Registration No. | If CBN Registration No. Not Available | | | |
| | | | | | | | | Name | Address | State | District |
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| Transaction Details with parties for Import/Export (Date wise Party Wise) | | | | | | | |
|---|---|---|---|---|---|---|---|
| Sr. No. | Transaction Type (Import/ Export/ Returned/ Received back) | Date | Trade Name | Amount of salt/unit (mg.) | No. of Units | Quantity | CBN Import/Export Authorisation No. |
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**Closing balance :**
**(Bulk Drug)**

**Closing balance (consolidated quantity):**
**(Preparation)**