



CHALLAN
MTR Form Number-6



GRN	MH004183110202425U	BARCODE			Date	26/06/2024-11:48:58		Form ID		
Department					Maharashtra Administrative Tribunal					
Type of Payment					Original Application Fees Cash Receipt of Record Room in Office which are ch					
Office Name					INCHARGE REGISTRAR MAT MUMBAI		Payer Details			
Location					MUMBAI		TAX ID / TAN (If Any)			
Year					2024-2025 One Time		PAN No.(If Applicable)			
Account Head Details					Amount In Rs.		Full Name		Pradip Gundo Kulkarni	
0070033201 Miscellaneous Receipts					50.00		Flat/Block No.		Plot No. 15	
							Premises/Building			
							Road/Street		Belagavi	
							Area/Locality		Karnataka	
							Town/City/District			
							PIN			
							Remarks (If Any)			
							Original Application fees			
Total					50.00		Amount In		Fifty Rupees Only	
							Words			
Payment Details					STATE BANK OF INDIA		FOR USE IN RECEIVING BANK			
Cheque-DD Details					Bank CIN		Ref. No.		00040572024062651063	
Cheque/DD No.					Bank Date		RBI Date		26/06/2024-11:24:49	
Name of Bank					Bank-Branch		STATE BANK OF INDIA			
Name of Branch					Scroll No. , Date		Not Verified with Scroll			

Department ID :

Mobile No. : 9372240896