

## CHALLAN MTR Form Number-6



			III Date	e 10/07/2024-12:2	27:54 <b>F</b>	orm ID				
Department Maharashtra Administrative Tribunal			Payer Details							
Original Application Fees Type of Payment Cash Receipt of Record Room in Office which are ch		TAX ID / TA	N (If Any)							
		PAN No.(If A	Applicable)							
Office Name INCHARGE REGISTRAR MAT MUMBAI		Full Name		Om Lonkar						
Location MUMBAI										
Year 2024-2025 One Time			Flat/Block No.							
Account Head Details Amount In Rs.		Premises/Building								
0070033201 Miscellaneous Receipts 50.00		Road/Street								
		Area/Locali	ity							
		Town/City/I	District							
		PIN								
		Remarks (If Any)								
		IPO Payment								
		Amount In	Fifty Rup	Rupees Only						
	50.00	Words								
Payment Details STATE BANK OF INDIA			FOR USE IN RECEIVING BANK							
Cheque-DD Details		Bank CIN	Ref. No.	0004057202407	1038528	CPADYSOWR0				
		Bank Date	RBI Date	10/07/2024-12:2	4:29	Not Ve	rified w	/ith F	RBI	
		Bank-Branch		STATE BANK OF INDIA						
			Scroll No., Date Not Verified with Scroll							
	Ve Tribunal ees ord Room in MAT MUM	ve Tribunal ees ord Room in Office which are ch MAT MUMBAI Amount In Rs. 50.00 Solution Solut	ve Tribunal       Image: sease of the constraint of the const	ve Tribunal       TAX ID / TAN (if Any)         ees       TAX ID / TAN (if Any)         ve Tribunal       PAN No.(if Applicable)         Ve Tribunal       Full Name         MAT MUMBAI       Full Name         MAT MUMBAI       Flat/Block No.         Amount In Rs.       Premises/Building         Solution       RearLocality         Manage       Area/Locality         Image       Image         Image       Image	Payer Deta         Marce Deta         Marce Deta         Amount In Rs.       Premises/Building         Payer Deta         Area/Locality         Payer Deta         Area/Locality         Payer Deta         Payer Deta         Payer Deta         Deta         Payer Deta         Payer Deta	Payer Details         MAT MUMBAI       Payer Details         MAT MUMBAI       Payer Details         Marce In Receive Sonitation (If Ary)         Image: Sonitation (If Ary) <t< td=""><td>Amount In Rs.       Flat/Block No. (If Any)         Flat/Block No. (If Applicable)       Om Lonkar         IMAT MUMBAI       Full Name       Om Lonkar         IMAT MUMBAI       Flat/Block No. (If Applicable)       Image: No. (If Applicable)         IMAT MUMBAI       Flat/Block No. (If Applicable)       Om Lonkar         Image: No. (If Applicable)       Image: No. (If Applicable)       Image: No. (If Applicable)         Image: No. (If Applicable)       Remarks (If Any)       Image: No. (If Applicable)         Image: No. (If Applicable)       Image: No. (If Applicable)       Image: No. (If Applicable)         Image: No. (If Applicable)       Image: No. (If Applicable)       Image: No. (If Applicable)       Image: No. (If Applicable)         Image: No. (If Applicable)       Image: No. (If Applicable)       Image: No. (If Applicable)       Image: No. (If Applicable)         Image: No. (If Applicable)       Image: No. (If Applicable)       Image: No. (If Applicable)       Image: No. (If Applicable)         Image: No. (If Applicable)</td><td>Payer Details         Payer Details</td><td>Amount In Rs.       Fat/Bock No.(If Any)         Fat/Bock No.(If Applicable)       Om Lonkar         MAT MUMBAI       Fat/Block No.(If Applicable)         Manual In Rs.       Premises/Building         Town/City/District       Town/City/District         Image: Amount In Rs.       Remarks (If Applicable)         Manual In Rs.       Remarks (If Applicable)         Image: Amount In Rs.       Premises/Building         Image: Amount In Rs.       Premises/Building     &lt;</td></t<>	Amount In Rs.       Flat/Block No. (If Any)         Flat/Block No. (If Applicable)       Om Lonkar         IMAT MUMBAI       Full Name       Om Lonkar         IMAT MUMBAI       Flat/Block No. (If Applicable)       Image: No. (If Applicable)         IMAT MUMBAI       Flat/Block No. (If Applicable)       Om Lonkar         Image: No. (If Applicable)       Image: No. (If Applicable)       Image: No. (If Applicable)         Image: No. (If Applicable)       Remarks (If Any)       Image: No. (If Applicable)         Image: No. (If Applicable)       Image: No. (If Applicable)       Image: No. (If Applicable)         Image: No. (If Applicable)       Image: No. (If Applicable)       Image: No. (If Applicable)       Image: No. (If Applicable)         Image: No. (If Applicable)       Image: No. (If Applicable)       Image: No. (If Applicable)       Image: No. (If Applicable)         Image: No. (If Applicable)       Image: No. (If Applicable)       Image: No. (If Applicable)       Image: No. (If Applicable)         Image: No. (If Applicable)	Payer Details         Payer Details	Amount In Rs.       Fat/Bock No.(If Any)         Fat/Bock No.(If Applicable)       Om Lonkar         MAT MUMBAI       Fat/Block No.(If Applicable)         Manual In Rs.       Premises/Building         Town/City/District       Town/City/District         Image: Amount In Rs.       Remarks (If Applicable)         Manual In Rs.       Remarks (If Applicable)         Image: Amount In Rs.       Premises/Building         Image: Amount In Rs.       Premises/Building     <	

Department ID :

Mobile No. : 9930488252