



CHALLAN  
MTR Form Number-6



GRN	MH007651541202425U	BARCODE			Date	01/09/2024-18:18:59		Form ID													
Department				Maharashtra Administrative Tribunal						Payer Details											
Type of Payment				Other Receipts						TAX ID / TAN (If Any)											
										PAN No.(If Applicable)											
Office Name				INCHARGE REGISTRAR MAT MUMBAI						Full Name		Varsha Dipak Kadbane and others vs Rashmi Shukla DGP and other									
Location				MUMBAI																	
Year				2024-2025 One Time						Flat/Block No.		ploot No. 24 Ravindranagar housingg Society									
Account Head Details				Amount In Rs.		Premises/Building															
0070077101 Other Receipts				10.00		Road/Street		Near Satarkar hospital													
						Area/Locality		chhhh. Sambhajinagar													
						Town/City/District															
						PIN				4		3		1		0		0		1	
						Remarks (If Any)															
						Aadv. Prashant M. Nagaargoje															
						Amount In		Ten Rupees Only													
Total				10.00		Words															
Payment Details				STATE BANK OF INDIA						FOR USE IN RECEIVING BANK											
Cheque-DD Details				Bank CIN		Ref. No.		00040572024090135843		CPAEEAXAF5											
Cheque/DD No.				Bank Date		RBI Date		01/09/2024-18:24:19		Not Verified with RBI											
Name of Bank				Bank-Branch		STATE BANK OF INDIA															
Name of Branch				Scroll No. , Date		Not Verified with Scroll															

Department ID :

Mobile No. : 9326333302