



CHALLAN  
MTR Form Number-6



|                                   |                    |         |  |   |      |                          |  |                      |  |                           |  |                                |  |
|-----------------------------------|--------------------|---------|--|---|------|--------------------------|--|----------------------|--|---------------------------|--|--------------------------------|--|
| GRN                               | MH007769329202425U | BARCODE |  |   | Date | 04/09/2024-10:23:44      |  | Form ID              |  |                           |  |                                |  |
| Department                        |                    |         |  | Maharashtra Administrative Tribunal   |      |                          |  |                      |  | Payer Details             |  |                                |  |
| Type of Payment                   |                    |         |  | Original Application Fees<br>Cash Receipt of Record Room in Office which are ch |      |                          |  |                      |  | TAX ID / TAN (If Any)     |  |                                |  |
|                                   |                    |         |  |   |      |                          |  |                      |  | PAN No.(If Applicable)    |  |                                |  |
| Office Name                       |                    |         |  | INCHARGE REGISTRAR MAT MUMBAI   |      |                          |  |                      |  | Full Name                 |  | Shri.Santosh Kishanrao Biradar |  |
| 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/Locality            |  |                      |  |                           |  |                                |  |
|                                   |                    |         |  |   |      | Town/City/District       |  |                      |  |                           |  |                                |  |
|                                   |                    |         |  |   |      | PIN                      |  |                      |  |                           |  |                                |  |
|                                   |                    |         |  |   |      | Remarks (If Any)         |  |                      |  |                           |  |                                |  |
|                                   |                    |         |  |   |      | Adv. Punam Mahajan       |  |                      |  |                           |  |                                |  |
|                                   |                    |         |  |   |      |                          |  |                      |  |                           |  |                                |  |
|                                   |                    |         |  |   |      |                          |  |                      |  |                           |  |                                |  |
|                                   |                    |         |  |   |      |                          |  |                      |  |                           |  |                                |  |
|                                   |                    |         |  |   |      | Amount In                |  |                      |  | Fifty Rupees Only         |  |                                |  |
| Total                             |                    |         |  | 50.00   |      | Words                    |  |                      |  |                           |  |                                |  |
| Payment Details                   |                    |         |  | STATE BANK OF INDIA   |      |                          |  |                      |  | FOR USE IN RECEIVING BANK |  |                                |  |
| Cheque-DD Details                 |                    |         |  | Bank CIN  |      | Ref. No.                 |  | 00040572024090435155 |  | CPAEEHLOH4                |  |                                |  |
| Cheque/DD No.                     |                    |         |  | Bank Date   |      | RBI Date                 |  | 04/09/2024-10:24:24  |  | 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. : 9579546901