

## CHALLAN MTR Form Number-6



<b>GRN</b> MH007940577202425P <b>B</b>	02425P <b>BARCODE                                 </b>			III Date	e 06/09/2024-17:2	5:26 <b>F</b>	Form 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 Dhananjay S Patil								
Location MUMBAI											
<b>Year</b> 2024-2025 One Time			Flat/Block No.								
Account Head Details		Amount In Rs.	Premises/B	uilding							
0070033201 Miscellaneous Receipts 1		110.00	Road/Street								
			Area/Locality								
			Town/City/District								
			PIN								
					Remarks (If Any)						
	Prashant Babanrao Deshmukh Vs State of Maharashtra and another										
			Amount In	One Hun	One Hundred Ten Rupees Only						
Total		110.00	Words								
Payment Details SBIEPAY PAYMENT GATEWAY			FOR USE IN RECEIVING BANK								
Cheque-DD Details			Bank CIN	Ref. No.	10000502024090	0607079	4042615948423				
Cheque/DD No.			Bank Date	RBI Date	06/09/2024-17:25	5:49	Not	Verif	ied with	n RBI	
Name of Bank			Bank-Branc	h	SBIEPAY PAYMENT GATEWAY						
Name of Branch	me of Branch			Date	Not Verified with Scroll						

Department ID: 9307124173