



CHALLAN
MTR Form Number-6



GRN	MH008573155202425P	BARCODE			Date	21/09/2024-14:59:47		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		Full Name		JAYESH ISHWAR PATIL	
Location				MUMBAI		Flat/Block No.		Hadsan Po. Pahan, Sub Dist- Panchore Dist-	
Year				2024-2025 One Time		Premises/Building		Jalgaon	
Account Head Details				Amount In Rs.		Road/Street		Panchora	
0070033201 Miscellaneous Receipts				50.00		Area/Locality		Jalgaon	
						Town/City/District			
						PIN		4 2 5 1 1 5	
						Remarks (If Any)			
						Amount In		Fifty Rupees Only	
Total				50.00		Words			
Payment Details				SBIEPAY PAYMENT GATEWAY					
Cheque-DD Details				Bank CIN		Ref. No.		10000502024092103414 7575790469033	
Cheque/DD No.				Bank Date		RBI Date		21/09/2024-15:00:03 Not Verified with RBI	
Name of Bank				Bank-Branch		SBIEPAY PAYMENT GATEWAY			
Name of Branch				Scroll No. , Date		Not Verified with Scroll			

Department ID :

Mobile No. : 8208243529