



CHALLAN  
MTR Form Number-6



|                      |                    |         |  |   |      |                          |  |   |  |                           |  |                                   |  |   |  |   |  |   |  |   |  |   |  |
|----------------------|--------------------|---------|--|---|------|--------------------------|--|---|--|---------------------------|--|-----------------------------------|--|---|--|---|--|---|--|---|--|---|--|
| GRN                  | MH009404553202425U | BARCODE |  |   | Date | 07/10/2024-19:08:24      |  | 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                 |  | Adv Prashant M Nagargoje          |  |   |  |   |  |   |  |   |  |   |  |
| Location             |                    |         |  | MUMBAI  |      |                          |  |   |  |                           |  |                                   |  |   |  |   |  |   |  |   |  |   |  |
| Year                 |                    |         |  | 2024-2025 One Time  |      |                          |  |   |  | Flat/Block No.            |  | 24, Ravindranagar Housing Society |  |   |  |   |  |   |  |   |  |   |  |
| Account Head Details |                    |         |  | Amount In Rs.   |      | Premises/Building        |  |   |  |                           |  |                                   |  |   |  |   |  |   |  |   |  |   |  |
| 0070033201           |                    |         |  | Miscellaneous Receipts  |      | 60.00                    |  | Road/Street   |  |                           |  |                                   |  |   |  |   |  |   |  |   |  |   |  |
|                      |                    |         |  |   |      |                          |  | Area/Locality                                       |  | Chh. Sambhajanagar        |  |                                   |  |   |  |   |  |   |  |   |  |   |  |
|                      |                    |         |  |   |      |                          |  | Town/City/District                                  |  |                           |  |                                   |  |   |  |   |  |   |  |   |  |   |  |
|                      |                    |         |  |   |      |                          |  | PIN   |  |                           |  | 4                                 |  | 3 |  | 1 |  | 0 |  | 0 |  | 1 |  |
|                      |                    |         |  |   |      |                          |  | Remarks (If Any)                                    |  |                           |  |                                   |  |   |  |   |  |   |  |   |  |   |  |
|                      |                    |         |  |   |      |                          |  | Rajiv Shivajirao Chavan VS The State of Maharashtra |  |                           |  |                                   |  |   |  |   |  |   |  |   |  |   |  |
|                      |                    |         |  |   |      |                          |  |   |  |                           |  |                                   |  |   |  |   |  |   |  |   |  |   |  |
|                      |                    |         |  |   |      |                          |  |   |  |                           |  |                                   |  |   |  |   |  |   |  |   |  |   |  |
|                      |                    |         |  |   |      |                          |  |   |  |                           |  |                                   |  |   |  |   |  |   |  |   |  |   |  |
|                      |                    |         |  |   |      |                          |  | Amount In   |  | Sixty Rupees Only         |  |                                   |  |   |  |   |  |   |  |   |  |   |  |
| Total                |                    |         |  | 60.00   |      | Words                    |  |   |  |                           |  |                                   |  |   |  |   |  |   |  |   |  |   |  |
| Payment Details      |                    |         |  | STATE BANK OF INDIA   |      |                          |  |   |  | FOR USE IN RECEIVING BANK |  |                                   |  |   |  |   |  |   |  |   |  |   |  |
| Cheque-DD Details    |                    |         |  | Bank CIN  |      | Ref. No.                 |  | 00040572024100771473                                |  |                           |  | CPAEHYMMV8                        |  |   |  |   |  |   |  |   |  |   |  |
| Cheque/DD No.        |                    |         |  | Bank Date   |      | RBI Date                 |  | 07/10/2024-19:24:09                                 |  |                           |  | 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