



CHALLAN
MTR Form Number-6



GRN	MH009463515202425U	BARCODE			Date	08/10/2024-16:44:03		Form ID								
Department					Maharashtra Administrative Tribunal						Payer Details					
Type of Payment					Original Application Fees Cash Receipt of Record Room in Office which are ch						TAX ID / TAN (If Any)		AGKPB3734A			
											PAN No.(If Applicable)		AGKPB3734A			
Office Name					INCHARGE REGISTRAR MAT MUMBAI						Full Name		VISHNU SURYABHAN MISAL			
Location					MUMBAI											
Year					2024-2025 One Time						Flat/Block No.		NAVI MUMBAI			
Account Head Details					Amount In Rs.						Premises/Building					
0070033201 Miscellaneous Receipts					50.00						Road/Street		NAVI MUMBAI			
											Area/Locality		NAVI MUMBAI KAMOTHE			
											Town/City/District					
											PIN					
											Remarks (If Any)					
											ADV A V BANDIWADEKAR					
											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.		00040572024100832792		CPAEIBSXQ1					
Cheque/DD No.					Bank Date		RBI Date		08/10/2024-16:24:45		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. : 9892134472