




GRN	MH012930152202425U	BARCODE			Date	20/12/2024-14:15:53				Form ID																			
Department					Maharashtra Administrative Tribunal																								
Type of Payment					Original Application Fees					Cash Receipt of Record Room in Office which are ch																			
					TAX ID / TAN (If Any)																								
Office Name					INCHARGE REGISTRAR MAT MUMBAI					Full Name					RAVINDRA VITTHAL JEDHE														
					Location					MUMBAI																			
Year					2024-2025 One Time					Flat/Block No.																			
Account Head Details					Amount In Rs.					Premises/Building																			
0070033201					Miscellaneous Receipts					210.00					Road/Street														
										Area/Locality																			
										Town/City/District																			
										PIN																			
										Remarks (If Any)																			
										Amount In					Two Hundred Ten Rupees Only														
Total					210.00					Words																			
Payment Details					STATE BANK OF INDIA					FOR USE IN RECEIVING BANK																			
Cheque-DD Details										Bank CIN					Ref. No.					00040572024122051897					CPAEPBYUQ3				
Cheque/DD No.										Bank Date					RBI Date					20/12/2024-14:24:16					Not Verified with RBI				
Name of Bank										Bank-Branch					STATE BANK OF INDIA														
Name of Branch										Scroll No. , Date					Not Verified with Scroll														

Mobile No. : 8425914701