



CHALLAN
MTR Form Number-6



GRN	MH014106149202425U	BARCODE			Date	10/01/2025-11:23:22		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		Adv Prashant M Nagargoje	
Location				MUMBAI		Flat/Block No.		Plot No. 24	
Year				2024-2025 One Time		Premises/Building		Ravindranagar	
Account Head Details				Amount In Rs.		Road/Street		Chh. Sambhajinagar	
0070033201 Miscellaneous Receipts				60.00		Area/Locality		Town/City/District	
						PIN		4 3 1 0 0 1	
						Remarks (If Any)		Vijay Hindurao More Vs The State of Maharashtra and other	
						Amount In		Sixty Rupees Only	
Total				60.00		Words			
Payment Details				STATE BANK OF INDIA					
Cheque-DD Details				Bank CIN		Ref. No.		00040572025011071383 CPAERHIQE6	
Cheque/DD No.				Bank Date		RBI Date		10/01/2025-11:23:49 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