FORM CA SUBMISSION OF CLAIM BY FINANCIAL CREDITORS IN A CLASS

(Under Regulation 8A of the Insolvency and Bankruptcy (Insolvency Resolution Process for Corporate Persons) Regulations, 2016)

From Date
Ajit Waman Ghogale 19/9/2022

3, Sitaram Chawl Vakola Vivekanad Nagar Dhobighat Santacruz East Mumbai 400055

То

The Interim Resolution Professional / Resolution Professional Rajesh Sureshchandra Sheth

Registered Address: B-55, Shatdal Society, 7th Floor, Azad Lane, Off S.V. Road, Andheri West, Near Shoppers Stop, Mumbai 400058, Maharashtra

Correspondence Address: Deloitte India Insolvency Professionals LLP, 27th Floor, Tower 3, One International Center, Senapati Bapat Marg, Elphinstone (W), Mumbai 400 013

Subject: Submission of claim and proof of claim.

Madam/Sir,

Ajit Waman Ghogale, hereby submits this claim in respect of the corporate insolvency resolution process of Pancard Clubs Limited. The details for the same are set out below:

	RELEVANT PARTICULAR	RS
1.	Name of the financial creditor	Ajit Waman Ghogale
2.	Identification number of the financial creditor (If an incorporated body, provide identification number and proof of incorporation. If a partnership or individual, provide identification records of all the partners or the individual)	ALRPG1559L
3.	Address and e-mail address of the financial creditor for correspondence.	3, Sitaram Chawl Vakola Vivekanad Nagar Dhobighat Santacruz East Mumbai 400055
4.	Total amount of claim (in Rs.)	100800
5.	Details of documents by reference to which the debt can be substantiated.	Pancard Membership certificate Bank Statement pancard Canceled Cheque
6.	Details of how and when debt incurred.	purchased membership of Pancard Club and Debit Incurred on 02 january 2012
7.	Details of any mutual credit, mutual debts, or other mutual dealings between the corporate debtor and the creditor which may be set-off against the claim.	No
8.	Details of any security held, the value of the security, and the date it was given	No
9.	Details of the bank account to which the amount of the claim or any part thereof can be transferred pursuant to a resolution plan	State Bank Of India ACC - 10458739047 IFSC CODE - SBIN0001467
10.	List of documents attached to this claim in order to prove the existence and non-payment of claim due	Pancard Membership certificate Bank Statement pancard Canceled Cheque
11.	Name of the insolvency professional who will act as the Authorised representative of creditors of the class	Mr. Devang Subodh Thakar

Signature of financial creditor or person authorised to act on its behalf
[Please enclose the authority if this is being submitted on behalf of the financial creditor]
Name in BLOCK LETTERS :
Position with or in relation to creditor :
Address of person signing :
*PAN number, passport, AADHAAR Card or the identity card issued by the Election Commission of India. DECLARATION
, Ajit Waman Ghogale, currently residing at
3, Sitaram Chawl Vakola Vivekanad Nagar Dhobighat Santacruz East Mumbai 400055, ajitghogale0075@gmail.com
do hereby declare and state as follows: -
1. Pancard Clubs Limited, the corporate debtor was, at the insolvency commencement date, being the 9th day of September 2022, actually indebted to me for a sum of Rs.100800
2. In respect of my claim of the said sum or any part thereof, I have relied on the documents specified below: [Please list the documents relied on as evidence of claim].
3. The said documents are true, valid and genuine to the best of my knowledge, information and belief and no material facts have been concealed therefrom.
4. In respect of the said sum or any part thereof, neither I, nor any person, by my order, to my knowledge or belief, for my use, had or received any manner of satisfaction or security whatsoever, save and except the following: [Please state details of any mutual credit, mutual debts, or other mutual dealings between the corporate
debtor and the creditor which may be set-off against the claim]
5. I am not a related party of the corporate debtor, as defined under section 5 (24) of the Code.
6. I am eligible to give voting instruction to the authorized representative by virtue of proviso to section 21 (2) of the Code even though I am a related party of the corporate debtor.
Date :
Place : (Signature of the claimant)
VERIFICATION
, [Name] the claimant hereinabove, do hereby verify that the contents of this proof of claim are true and correct
to my knowledge and belief and no material fact has been concealed therefrom.
Verified at on this day of, 20
(Signature of claimant)

[Note: In the case of company or limited liability partnership, the declaration and verification shall be made by the director/manager/secretary/designated partner and in the case of other entities, an officer authorized for the purpose by the entity.]