

CHALLAN MTR Form Number-6



GRN MH016627	7707202425U	BARCODE				IIII Dat	e 23/02/2025-12:3	36:31 F	orm l	ID			
Department Food, Civil Supplies and consumer Protection Department				Payer Details									
	Service and Se				TAX ID / TA	N (If Any)							
Type of Payment Services and Services Fees				PAN No.(If A	Applicable)								
Office Name FOOD DISTRIBUTION OFFICE AURANGABAD				Full Name		SADHANA BHARAT KANKAL							
Location CHI	HATRAPATI SA	MBHAJINAGAI	R										
Year 2024-2025 From 23/02/2025 To 23/02/2025			Flat/Block No.										
Acc	count Head De	tails		Amount In Rs.	Premises/B	uilding							
0408002401 Service Fee 100.0			100.00	Road/Stree	Road/Street								
					Area/Locali	ty	Chhatrapati Sambhajinagar [515]						
					Town/City/l	District							
					PIN								
					Remarks (If Any)								
					SN								
FAG													
DETACES	7												
₹100.00													
	7				Amount In	One Hur	one Hundred Rupees Only						
Total EFACE				100.00	Words								
Payment Details STATE BANK OF INDIA				FOR USE IN RECEIVING BANK									
Cheque-DD Details				Bank CIN	Ref. No.	0004057202502	2355020	0 CP	CPAEVPZZQ8				
Cheque/DD No.					Bank Date	RBI Date	23/02/2025-12:0	2:14	24/0	02/2	025		
Name of Bank			Bank-Branc	h	STATE BANK OF INDIA								
Name of Branch				Scroll No.,	Date	256 , 24/02/2025							

Department ID : RCMH20252230000083477

Challan Defaced Details

Sr. No.	Remarks	Defacement No.	Defacement Date	UserId	Defacement Amount		
1	RCMH20252230000083477	0009305916202425	27/02/2025-11:40:28	FDS432	100.00		
			100.00				

Mobile No. :

7448044362