



CHALLAN
MTR Form Number-6



(See Rule 11, 11C, 17, 20, 22(4) and 27B of the Professions Tax Rules, 1975)
Account Head 00280012

GRN	MH020004726202526U	BARCODE			Date	26/03/2026-17:46:41		Form ID	FORM_VIII	
Department Commissioner of Sales Tax					Payer Details					
Profession Tax - PTEC					TAX ID / TAN (If Any)		99474905683P			
Type of Payment Maharashtra Profession Tax PTEC					PAN No.(If Applicable)		AANXXXXXXR			
Office Name Sales Tax Office AHMEDNAGAR					Full Name		SAICHAYA GRAMIN SWAYAMSEVI BAHUDDESHIYA VIKAS SANSTHA			
Location AHMEDNAGAR										
Year 2025-2026 From 01/04/2025 To 31/03/2026					Flat/Block No.					
Account Head Details				Amount In Rs.	Premises/Building					
AMOUNT OF TAX				2500.00	Road/Street					
					Area/Locality					
					Town/City/District					
					PIN					
					Remarks (If Any)					
					Amount In		Two Thousand Five Hundred Rupees Only			
Total				2,500.00	Words					
Payment Details STATE BANK OF INDIA					FOR USE IN RECEIVING BANK					
Cheque-DD Details					Bank CIN	Ref. No.	00040572026032617320		CPAGNHBP5	
Cheque/DD No.					Bank Date	RBI Date	26/03/2026-17:24:49		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 : URN58878163391PE

Mobile No. : XXXXXX5300