DEPARTMENT OF SALES TAX

GOVERNMENT OF MAHARASHTRA, INDIA

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CHALLAN
MTR FORM NO.6
(See Rule 11, 11C, 17, 20, 22(4) and 27B of the Profession Tax Rules, 1975)
ACCOUNT HEAD:- 00280012

GRN		**Form-ID**	FORM3B
Department	Department of Sales Tax	**Date**	17-01-2023
Type of Payment	PTRC ACT	**Payee Details**	
Location	THANE	**Dept-ID Dealers TIN**	27810645377P
URN No.	URN10016234026TR	**BRN No.**	0583602227

Period		**Full Name of the Dealer**	IRIS BUSINESS SERVICES IINDIA PVT LTD
From	**To**		
01-01-2023	31-01-2023		

Account Head Details	**Code**	**Amount in Rs**	**Remarks if any:- Regular Payment**
Amount of Tax		0	
Amount of TDS		0	
Interest Amount		0	
Penalty Amount		0	
Composition Money		0	
Fine		0	
Fees		0	
Advance Payment		78,975	
Amount Forfeited		0	
Deposit		0	
Total		78,975	**Amount In Words** Rupees Seventy Eight Thousand Nine Hundred Seventy Five Only

Payment Details		**For use in Receiving Bank**	
Name of Bank	SBIEPAY	**Bank CIN No.**	10002232023011700729
Name of Branch		**Date**	17-01-2023
		Time	14:14:29 PM
Mode of Pay	**e-Payment**		

Disclaimer: *Payment confirmation is subject to RBI Clearance.*