Name of the corporate debtor: Bate of commencement of liquidation: DR W. List of stakeholders as on: 16,02 20 W

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Details	Department
Details of Claimant	Government Date of Amount Amount Nature Amount receipt claimed of claim of covered admitted claim lien or attachme pending disposal
Details of claim received	Date of receipt
of claim I	Amount claimed
	Date of Amount Amount Nature Amount receipt claimed of claim of covere admitted claim lien or attach pendin dispos
Deta	Nature of claim
Details of claim admitted	Amount Whe covered by lien lien or attachment rempending (Yes
	ther/chmecoved
	% share contin in total claim nt amount of claims admitted
Amount	contingent claim
Amount of any	mutual dues, that may be set off
Amount Amo of claim clain	rejected
unt of	under verification
Remarks, if any	¥;

No.

Annexure-6

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BELDINGING TO

TURLIANTIA MO

Name of the corporate debtor:; Date of commencement of liquidation:; List of stakeholders as on:

List of operational creditors (other than Workmen, Employees and Government Dues)

SI.			
SI. Name of Details of claim			
Details rec	Date of receipt		
tails of claim received	Date of Amount Amount receipt claimed of claim admitte		
	Amount Natur of claim of admitted claim		
	·e		/
Details of claim admitted	Nature Amount Whether of covered by lien / claim lien or attachment removed? pending disposal (Yes/No)	1	
im admitted	Whether lien / attachment removed? (Yes/No)		
1	Amount % share covered by in total guarantee amount of claims admitted		
	% share in total amount of claims admitted		
Amount of Amoun	claim	4	
f Amount of any	ay		
Amount of claim	rejected		
Amount of Amount Amount of Remarks contingent of any of claim claim under if any	rejected verification		
Remarks,			