



CHALLAN  
MTR Form Number-6



GRN	MH005616514202425U	BARCODE	[Barcode]				Date	23/07/2024-13 37 42	Form ID	
Department					Inspector General Of Registration					
Type of Payment					Payer Details					
Non-Judicial Stamps					TAX ID / TAN (If Any)					MUMB21073D
General Stamps SoS Mumbai only					PAN No.(If Applicable)					AAECB2964M
Office Name					Full Name					BSE INSTITUTE LIMITED
GENERAL STAMP OFFICE MUMBAI					Flat/Block No.					25TH FLOOR
Location					Premises/Building					
MUMBAI					Road/Street					DALAL STREET
Year					Area/Locality					FORT MUMBAI
2024-2025 One Time					Town/City/District					
Account Head Details					PIN					4 0 0 0 0 1
Amount In Rs.					Remarks (If Any)					
0030056201 General Stamps					Collaboration Agreement with Victoria Institution (College)					
100.00					Amount In					One Hundred Rupees Only
Total					Words					
100.00					FOR USE IN RECEIVING BANK					
Payment Details					STATE BANK OF INDIA					
Cheque-DD Details					Bank CIN					00040572024072363487
Cheque/DD No.					Ref. No					CPAAEYWG7
Name of Bank					Bank Date					23/07/2024-13-24 39
Name of Branch					RBI Date					Not Verified with RBI
					Bank-Branch					STATE BANK OF INDIA
					Scroll No . Date					Not Verified with Scroll

Department ID

NOTE:- This challan is valid for document to be registered in Sub Registrar office only. Not valid for unregistered document. Mobile No : 9082030760  
सदर चलन कॅषल द्रव्यम निवधक कार्यालयात नोंदणी करावयाच्या दस्तांसाठी लागू आहे. नोंदणी न करावयाच्या दस्तांसाठी सदर चलन लागू नाही.


  
Principal  
VICTORIA INSTITUTION  
(College)

**13. NOTICES:**


All notices, requests, demands and other communications under this Agreement or in connection herewith shall be given to or made upon the respective Parties as follows:

**To BIL:** Mr. Chandrakant Joge, Manager Legal and CS, (BSE Institute Limited, P.J. Towers 19<sup>th</sup> Floor, Dalal Street, Fort, Mumbai - 400 001, Maharashtra State)

**To Victoria Institution (College):** Dr Chhotelal Chouhan, Assistant Professor, Department of Commerce, Victoria Institution (College), Kolkata-700009

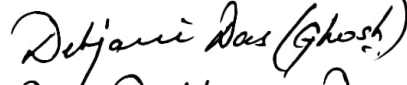
Or to such other person or address as any of the parties shall have notified to the other party. All notices, requests, demands and other communications given or made in accordance with the provisions of this Agreement shall be in writing by registered letter, fax, or telegram.

**IN WITNESS WHEREOF** both the Parties through their duly authorized representatives signed this Agreement on this 23<sup>rd</sup> day of July 2024.

<p>SIGNED and DELIVERED for and on behalf of <b>BSE INSTITUTE LIMITED "BIL"</b>.</p>	<p>SIGNED and DELIVERED for and on behalf of <b>Victoria Institution (College)</b></p>
<p>                    Authorized Signatory                  Name: Subhayu Das                  Title: Assistant General Manager</p>	<p>                    Authorized Signatory                  Name: Dr. Maitreyi Ray Kanjilal                  Title: Principal</p>
<p>                    In Presence of Witness:                  Name: Tamal Choudhuri                  Title: Assistant Manager</p>	<p>  <b>DR. SUMALYA KARMAKAR</b>                  IQAC Co-ordinator                  Victoria Institution (College)                  In Presence of Witness:                  Name: _____                  Title: _____</p>


  
 Dr. Debjani Das (Ghosh)  
 Associate Professor,  
 GB Member

  
 VICTORIA INSTITUTION  
 78B,  
 A.P.C. Road  
 Kolkata-9  
 COLLEGE