




<u>Public Trust Registration Office</u> Greater Mumbai Region <u>Trust Accounts Submission Verification Form</u>	<u>Accounting Year</u> <u>2021-2022</u>
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<u>Trust Information</u>	Acknowledgement No: GBR/029357/TA/25 Name of Trust: SARDAR VALLABHBHAI PATEL NAGAR RAHIWASHI WELFARE ASSOCIATION Address of Trust: PLOT 78 14 SATHI SAHAKARI GRUHNIRMAN SANSTHA SARDAR PATEL NAGAR MHADA VERSOVA ANDHERI WEST MUMBAI 400053 Mumbai Mumbai - 0.	Date: 03-03-2025 Trust Number: F-0053399(GBR)
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<u>Accounts Details</u>	<table style="width: 100%;"> <tr> <td style="width: 80%;">1. Total amount recovered during the year (Schedule IX-A)</td> <td style="width: 20%; text-align: right;">2036</td> </tr> <tr> <td>2. Total arrears outstanding(Schedule IX-A)</td> <td style="text-align: right;">0</td> </tr> <tr> <td>3. Total Income (Schedule IX-B)</td> <td style="text-align: right;">2036</td> </tr> <tr> <td>4. Total Expenditure (Schedule IX-B)</td> <td style="text-align: right;">2000</td> </tr> <tr> <td>5. Balance (Schedule IX-B)</td> <td style="text-align: right;">36</td> </tr> </table>	1. Total amount recovered during the year (Schedule IX-A)	2036	2. Total arrears outstanding(Schedule IX-A)	0	3. Total Income (Schedule IX-B)	2036	4. Total Expenditure (Schedule IX-B)	2000	5. Balance (Schedule IX-B)	36
1. Total amount recovered during the year (Schedule IX-A)	2036										
2. Total arrears outstanding(Schedule IX-A)	0										
3. Total Income (Schedule IX-B)	2036										
4. Total Expenditure (Schedule IX-B)	2000										
5. Balance (Schedule IX-B)	36										

VERIFICATION		
<p>We, Trustees and Auditor of above mentioned trust, declare to the best of our knowledge and belief, the information given in the financial statements, audit report and schedules which have been transmitted electronically by us vide GBR/029357/TA/25 is correct and complete and that the amounts and particulars shown above are truly stated and are in accordance with Maharashtra Public Trust Act, 1950.</p>		
Trustee 1 (Name) : _____		
Signature : 	Place: _____	Date: _____
Trustee 2 (Name) : _____		
Signature : 	Place: _____	Date: _____
Trustee 3 (Name) : _____		
Signature : 	Place: _____	Date: _____