22	7 - 4 - 7	SI. No.				
Employees State Insurance Corporation	Employees Provident Fund Organisation, Ministry of Labour, Govt. of India.	Department	. Detai			
		Government	Details of Claimant		A TOLLING OF	Name of
		Identification No.			ine corporate ue	he comorate de
		Date of receipt	Deta			htor.
797,423.00	1,356,722.00	Amount claimed	Details of claim received		Рас	Name of the corporate debtor: Control of the corporate debtor: Control of the cor
797,423.00	1,356,722.00	Amount of claim Nature of admitted claim			List of operational creditors (Government Dues)	5
	·	Nature of claim	Der	(Amount in ₹)	al credito	Annexure-5
		Amount covered Whether lien by lien or attachment attachment removed? pending disposal (Yes/No)	Details of claim admitted	in ₹)	rs (Government	re-5
		Whether lien / attachment removed? (Yes/No)			Dues)	: Lis
•	•	% share in total amount of claims admitted				t of stakehol
		Amount of contingent claim				ders as on:
		Amount of any mutual dues, that may be set off				
		Amount of claim rejected				
		Amount of claim under verification				
		Remarks, if any		Ш		