

Annexure-6 to Circular No. IBB/CI/P/47/2021 dated 24.11.2021

Sl. No.	Name of authorised representative, if any	Name of employee	Details of claim received		List of Employees Details of claim admitted								
			Date of receipt	Amount claimed	Amount of claim admitted	Nature of claim	Whether related party?	% of voting share in CoC, if applicable	Amount of contingent claim	Amount of any mutual dues, that may be set-off	Amount of claim under verification	Amount of claim not admitted	Remarks, if any
NIL													