

Annexure - 4

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Name of Corporate debtor				Date of Commencement of Liquidation				List of Stakeholders as on						
List of Operational Creditors (Employees)														
													Amount in Rs	
Sl.No	Name of Authorised Representative , if any	Name of the Employee	Identification No	Details of Claim Received		Details of Claim Admitted				Amount of Contingent Claim	Amount of any mutual dues, that may be setoff	Amount of claim rejected	Amount of claim under verification	Remarks, if any
				Date of receipt	Amount claimed	Total Amount amount of claim admitted	claim for the period of twelve months preceding the	Nature of claim	in total amount of claims admitted					
1		K Saravanan		13.04.2023	8,05,000	-	-	Employee	NIL	-	-	8,05,000	-	-