



**Daily Chart showing Cheque deposited by the Insurance Company for payment of compensation**

Date: 27.05.2024

Name of Presiding Officer:

Smt. Sharmila Bhuyan,  
Member, M.A.C.T., Lakhimpur, N.L.

| Sl No. | Case No. | Name of the Insurance Company/ authority | Name of the Claimant | Compensation amount | Date of Credit |
|--------|----------|------------------------------------------|----------------------|---------------------|----------------|
| Nil.   | Nil      | Nil                                      | Nil                  | Nil                 | Nil            |

*[Signature]*  
27.5.24

Member, M.A.C.T.,  
Lakhimpur, North Lakhimpur

*[Signature]*  
28/05/24