



**ESIC**  
Employees' State Insurance Corporation

Insurance

0

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**Transaction Details**

\* Required Fields

<b>Transaction status:</b>	Completed successfully.
<b>Employer's Code No:</b>	20001071500001001
<b>Employer's Name:</b>	SHIV TRAVEL
<b>Challan Period:</b>	Sep-2023
<b>Challan Number :</b>	02023134993583
<b>Challan Created Date</b>	10-10-2023 19:43:44
<b>Challan Submitted Date</b>	11-10-2023 11:08:01
<b>Amount Paid:</b>	52406.00
<b>Transaction Number:</b>	CPADDXTYV3
<a href="#">Print</a> <a href="#">Close</a>	

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