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Insurance

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Employees' State Insurance Corporation

Monthly Contribution > Online Challan Form

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Transaction Details		* Required Field
Transaction status:	Completed Successfully	
Employer's Code No:	22000701970001001	
Employer's Name:	PARADISE ENTERPRISES	
Challan Period:	May-2024	
Challan Number :	02224120578300	
Challan Created Date	07-06-2024 12:17:20	
Challan Submitted Date	08-06-2024 11:29:27	
Amount Paid:	4156.0	
Transaction Number:	1389144883	
	Print Close	

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