



**कर्मचारी राज्य बीमा निगम**  
**Employees' State Insurance Corporation**  
(Ministry of Labour & Employment, Government of India)



**श्रम एवं रोजगार मंत्रालय**  
**Ministry of Labour & Employment**  
भारत सरकार (Government of India)

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**e-Challan Payment**

**Required Fields**

<b>Employer Code *</b>	20001071500001001
<b>Transaction Details</b> <span style="float: right;">* Required Fields</span>	
<b>Transaction status:</b>	Transaction Completed Successfully
<b>Employer's Code No:</b>	20001071500001001
<b>Employer's Name:</b>	SHIV TRAVELS
<b>Challan Period:</b>	Jun-2021
<b>Challan Number :</b>	02021120971740
<b>Challan Created Date</b>	11-07-2021 12:22:12
<b>Challan Submitted Date</b>	14-07-2021 11:01:17
<b>Amount Paid:</b>	67897.00
<b>Transaction Number:</b>	CPAAXMHJY2
<div>Print Close</div>	

IP Address :

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