



Insurance

e-Challan Payment

Required Fields

Employer Code *	67101044190011001
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Transaction Details

* Required Fields

Transaction status:	Transaction Completed Successfully
Employer's Code No:	67101044190011001
Employer's Name:	
Challan Period:	Nov-2020
Challan Number :	06720135590822
Challan Created Date	12-12-2020 10:28:43
Challan Submitted Date	12-12-2020 10:28:54
Amount Paid:	4107
Transaction Number:	55681111

Print

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