



**ESIC**  
Employees' State Insurance Corporation

Insurance

0

Monthly Contribution > Online Challan Form

Transaction Details		* Required Fields
<b>Transaction status:</b>	Transaction is successful	
<b>Employer's Code No:</b>	20001032640001001	
<b>Employer's Name:</b>	PAL FACILITY MANAGEMENT SERVICES PVT LTD	
<b>Challan Period:</b>	Mar-2023	
<b>Challan Number :</b>	02023114155660	
<b>Challan Created Date</b>	15-04-2023 17:31:57	
<b>Challan Submitted Date</b>	15-04-2023 18:12:29	
<b>Amount Paid:</b>	335133.00	
<b>Transaction Number:</b>	105150423375691	

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