



**ESIC**  
Employees' State Insurance Corporation

Insurance

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Transaction Details		* Required Fields
<b>Transaction status:</b>	Completed successfully.	
<b>Employer's Code No:</b>	20690312580011099	
<b>Employer's Name:</b>	SAMS FACILITIES MANAGEMENT (P) LTD	
<b>Challan Period:</b>	Aug-2022	
<b>Challan Number :</b>	02022131116485	
<b>Challan Created Date</b>	15-09-2022 23:35:23	
<b>Challan Submitted Date</b>	22-09-2022 17:41:04	
<b>Amount Paid:</b>	98517.00	
<b>Transaction Number:</b>	CHK5094223	
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