



Insurance

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[Monthly Contribution](#) > [Online Challan Form](#)

Transaction Details		* Required Fields
Transaction status:	Completed successfully.	
Employer's Code No:	11000305100001001	
Employer's Name:	UJJAWAL ENTERPRISES	
Challan Period:	Feb-2020	
Challan Number :	01120109607809	
Challan Created Date	30-03-2020 14:01:56	
Challan Submitted Date	30-03-2020 14:39:44	
Amount Paid:	195635.00	
Transaction Number:	CPAACHVCY9	

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