

Number OF Transactions: 1

Beneficiary Name: MI VA COSMOLINGUA CENTER LTD

Beneficiary IBAN: cy68008001040000000002162316

Payment Mode: Bank Transfer

Commission Value: 0.0000

Reference Number: SO - 140343733736

Date/Time: 2021/02/14 14:09

Date	Time	TranID	Customer Name	Guardian First Name	Guardian Last Name	Payment Reason	Student First Name	Student Last Name	Amount	Fee	Net Amount
2021/02/14	14:03	2143418	MARIA MICHA ELIDOU	Maria	Meramv eliotaki	Tuition Payment (Utilities and Services)	Styliana	Meramv eliotakis	95.0000	0.4800	94.5200
Total									95.0000	0.4800	94.5200