Merchant Standing Order Payment Report

Number OF Transactions: 1
Beneficiary Name: MI VA COSMOLINGUA CENTER LTD
Beneficiary IBAN: cy68008001040000000002162316
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 190416374578
Date/Time: 2021/04/10 19:09
Beneficiary Bank Name: AstroBank Limited

Date	Time	TranID	Customer Name	Guardian First Name	Guardian Last Name	Payment Reason	Student First Name	Student Last Name	Amount	Fee	Net Amount
2021/04/10	19:04	2864296	Χρήστος Χατζόπουλος	Christos	Chatzopoulos	Exams Fee Payment (Utilities and Services)	Vera	Chatzopoulou	69.00	0.34	68.66
Total									69.00	0.34	68.66

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