



Number OF Transactions: 1

Beneficiary Name: DASOUPOLIS PARENTS
ASSOCIATION

Beneficiary IBAN: CY560050014400014401G9013901

Payment Mode: Bank Transfer

Commission Value: 0.00

Reference Number: SO - 356589

Date/Time: 2021/04/14 03:35

Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY
LTD

Date	Time	TranID	Payer Mobile Numbe r	Class	Event	Qty	Payer Name	Student Name	Amount	Net Amount
2021/04/13	12:08	2901809	3579954 5777	Γ1	ΑΛΛΟΣ ΛΟΓΟΣ / OTHER	1	EVANG ELOS Hadjichr istodoul ou	Αντώνης Χατζηχρ ιστοδού λου	50	50.00
Total						1			50	50.00