



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 - 161307687349
Date/Time: 2021/04/16 16:16
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
2021/04/16	16:13	2947906	Αννα Σωτηρίου	ANNA	SOTERIOU	Exams Fee Payment (Utilities and Services)	CHRISTOS	PITTAS	103.00	0.52	102.48
Total									103.00	0.52	102.48