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 - 101644787867
Date/Time: 2021/04/27 10:21
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
2021/04/27	10:16	3110816	CONSTANTINOS MICHAEL	Constantinos	Michael	Tuition Payment 'Utilities and Services)	Michalis	Michael	75.00	0.38	74.62
Total									75.00	0.38	74.62

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