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 - 192658914693
Date/Time: 2021/04/27 19:29
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	19:26	3117579	Loucia Charalambous	Loucia	Charalambous	Exams Fee Payment (Utilities and Services)	Christophoros	Constantinou	69.00	0.34	68.66
Total									69.00	0.34	68.66

57, John Kennedy Avenue, 3rd Floor
1076, Nicosia, Cyprus
Tel: +357 22 27 67 37
Fax: +357 22 27 67 35
Email: contact@skash.com