Merchant Standing Order Payment Report

Number OF Transactions: 2

Beneficiary Name: DASOUPOLIS PARENTS ASSOCIATION

Beneficiary IBAN: CY56005001440001440 1G9013901

Payment Mode: Bank Transfer

Commission Value: 0.00

Reference Number: SO - 045623

Date/Time: 2021/06/16 03:14

Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Time	TranID	Payer Mobile Number	Class	Event	Qty	Payer Name	Student Name	Amount	Net Amount
2021/06/15	09:15	3831444		OTHER	OTHER	1	B/O: POUYIOUTAS CONSTANTINOS G		#Error	#Error
	12:46	3833831	35799496478	ΣΤ2	ΦΩΤΟΓΡΑΦΗΣΗ ΤΕΛΙΚΗΣ ΓΙΟΡΤΗΣ ΤΕΛΕΙΟ ΦΟΙΤΩΝ	1	Charalambos Poyiadjis	Stylianos Poyiadjis	17	17.00

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

Total						2			#Error	#Error

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