



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 - 092036288450
Date/Time: 2021/08/03 10:23
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
2021/08/03	09:20	4449617	B/O: KLEAN THOUS KLEAN THOULL A						75.00	0.38	74.62
Total									75.00	0.38	74.62