



Number OF Transactions: 1
Beneficiary Name: DASOUPOLIS PARENTS ASSOCIATION
Beneficiary IBAN: CY560050014400014401G9013901
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 503333
Date/Time: 2021/09/29 03:11
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Time	TranID	Payer Mobile Number	Class	Event	Qty	Payer Name	Student Name	Amount	Net Amount
2021/09/28	16:48	5141120	35799516010	ΣΤ1	ΕΓΓΡΑΦΗ ΓΙΑ ΣΥΝΔΡΟΜΗ ΣΤΟΝ ΣΥΝΔΕΣΜΟ	1	Theognosia Philippos	Elina Vassiliadou	55.00	55.00
Total						1			55.00	55.00