Merchant Standing Order Payment Report

Number OF Transactions: 1

Beneficiary Name: DASOUPOLIS PARENTS ASSOCIATION

Beneficiary IBAN: CY56005001440001440 1G9013901

Payment Mode: Bank Transfer

Commission Value: 0.00

Reference Number: SO - 304663

Date/Time: 2021/10/13 03:58

Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Time	TranID	Payer Mobile Number	Class	Event	Qty	Payer Name	Student Name	Amount	Net Amount
2021/10/12	21:13	5342051	35799040141	A2	ΕΓΓΡΑΦΗ ΓΙΑ ΣΥΝΔΡΟΜΗ ΣΤΟΝ ΣΥΝΔΕΣΜΟ	1	Stavria Morfi	Danae Keleshi	25	25.00
Total						1			25	25.00

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