



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 - 193344872798
Date/Time: 2021/11/15 08:55
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
2021/11/13	19:33	5795126	Michail Kazdaglis	MICHAEL	KAZDAGLIS	Tuition Payment (Utilities and Services)	KONSTANTINOS	KAZDAGLIS	270.00	1.35	268.65
Total									270.00	1.35	268.65