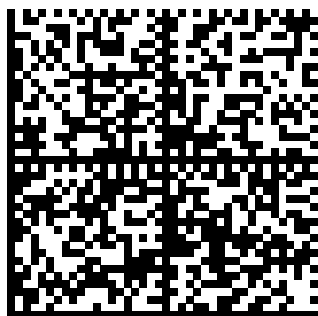


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Payment Receipt

Generated on 07/03/2019

Remita Retrieval Reference (RRR)

3502-8339-1335

null

Thirdparty notification not required

PAYER INFORMATION

NAME	ARIJENIWA FAITH ADETOMIWA
EMAIL	skolly47@gmail.com
PHONE NUMBER	08032684227

PAYMENT DETAILS

PAYMENT DATE	PAYMENT REF	SERVICE DESCRIPTION	AMOUNT (NGN)	CHARGES (NGN)	VAT (NGN)	TOTAL (NGN)
07/03/2019	350283391335	UNDERGRADUATE SCHOOL FEES	15,400.00	278.77	0.00	15,678.77
TOTAL PAID			15,400.00	278.77	0.00	15,678.77
TOTAL INVOICE AMOUNT						15,678.77
BALANCE DUE						0.00

BILLER-REQUIRED INFORMATION

PAYMENT CHANNEL INFORMATION

PAYMENT CHANNEL	AUTHORIZATION REF.
CARD PAYMENT	3880013597 - 3880015909