FEDERAL UNIVERSITY OF HEALTH SCIENCES OTUKPO



Payment Receipt

Generated on 28/09/2021

Remita Retrieval Reference (RRR)

2505-5000-9277

PAYER INFORMATION

NAME	AARON FAITH MBYAL
INAIVIE	AANON FAITH WIDTAL

EMAIL aaronfaithmbyami@gmail.com

PHONE NUMBER 234 808 389 0684

PAYMENT DETAILS

PAYMENT DATE	PAYMENT REF	SERVICE DESCRIPTION	AMOUNT (NGN)	CHARGE (NGN)	VAT on Charges (NGN)	TOTAL (NGN)
28/09/202 1	250550009277	STUDENT CHARGES	20,000.00	250.00	18.75	20,268.75
		TOTAL PAID	20,000.00	250.0 0	18.75	20,268.75
		TOTAL AMOUNT				20,268.75
		BALANCE DUE				0.00

BILLER-REQUIRED INFORMATION

ITEM DESCRIPTION

Description ACCEPTANCE FEE

PAYMENT CHANNEL INFORMATION

PAYMENT CHANNEL MASKED CARD PAN AUTHORIZATION REF. CARD SCHEME

CARD PAYMENT 8336871419 -

PAYMENT CHANNEL INFORMATION