

**Payment instruction - Detailed report****Batch details**

Batch id	Date & time created	Payment type
<b>61657461</b>	<b>22/03/2024 09:32:06 AM CAT</b>	<b>OLIVINE INDUSTRIES</b>
No. of instructions	Customer batch reference	Submission mechanism
<b>1</b>		<b>Online capture</b>
Last modified date	Amount	Currency
<b>22/03/2024</b>	<b>1,000.00</b>	<b>USD</b>
Date & Time submitted	Date & Time accepted	Status
<b>22/03/2024 10:26:43 AM CAT</b>	<b>22/03/2024 10:26:42 AM CAT</b>	<b>Fully Processed</b>

**Instruction details**

Instruction id.	Value date	Status
<b>68653529</b>	<b>22/03/2024</b>	<b>Delivered for Processing</b>
No. of transactions	Service level	Authoriser
<b>1</b>	<b>Urgent</b>	<b>[PRADEEP CHOUDHARY, SYLVESTER DENDERE]</b>
Credit amount	Charges paid by	Submission mechanism
<b>1,000.00 (USD)</b>	<b>OUR</b>	<b>Online capture</b>
Funding option		
<b>Available funds</b>		

**Pay from**

Account number	Account name	Account type
<b>9140001039171</b>	<b>OLIVINE INDUSTRIES</b>	<b>OD006-Corporate Current Account</b>
Debit amount	Total transfer amount	
<b>1,000.00 (USD)</b>	<b>1,000.00 (USD)</b>	
Debit account currency	Transfer currency	Debit reference
<b>USD</b>	<b>USD</b>	<b>AMA</b>
BIC (SWIFT)		
<b>SBICZWHX</b>		

**Transaction details**

Transaction id.	Beneficiary code	Beneficiary name
<b>2</b>	<b>AMA001</b>	<b>AGRICULTURAL MARKETING AUTHORITY</b>
Beneficiary type	Beneficiary entity category	Beneficiary nationality
<b>Pre-defined</b>		
	Account number	Account type
	<b>01122829630098</b>	
Account currency	Sort Code	BIC (SWIFT)
<b>USD</b>	<b>06101</b>	<b>COBZZWHA</b>
Beneficiary bank name	Beneficiary bank branch name	IBAN
<b>CBZ</b>	<b>KWAME NKRUMAH</b>	
Transfer amount		Beneficiary reference
<b>1,000.00</b>		<b>AMA001</b>
Transaction type	ISN/Bus Ref	Submission mechanism
<b>RTGS</b>		<b>Online capture</b>

**Disclaimer**

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**Payment instruction - Detailed report**

Transaction status

**Delivered for Processing**

Intermediary bank name

Intermediary bank city

Intermediary bank BIC(SWIFT)

Correspondent bank name

Correspondent bank city

Correspondent bank BIC(SWIFT)

Biller id.

Class of entry

Instruction code

Instruction text

Regulatory reporting

Beneficiary gender

Beneficiary identification type

Regulatory reporting

Beneficiary identification no

Passport country/region

Beneficiary address

Beneficiary bank address

**LEMAN ROAD MOUNT PLEASANT**

Balance of Payment reason

**Pay alert details****Title and name****Address or number****Status****Date and time sent****End of report****Disclaimer**

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