

Payment instruction - Detailed report

Batch details

Batch id	Date & time created	Payment type
67527781	21/10/2024 10:36:14 AM CAT	ZIMFLORA WCHIBVUMA
No. of instructions	Customer batch reference	Submission mechanism
1		Online capture
Last modified date	Amount	Currency
21/10/2024	350.00	USD
Date & Time submitted	Date & Time accepted	Status
21/10/2024 10:55:39 AM CAT	21/10/2024 10:55:38 AM CAT	Processing

Instruction details

Instruction id.	Value date	Status
73809426	21/10/2024	Processing
No. of transactions	Service level	Authoriser
1	Urgent	[NICOLA ARCHER]
Credit amount	Charges paid by	Submission mechanism
350.00 (USD)	OUR	Online capture
Funding option		
Available funds		
Pay from		

Account number	Account name	Account type
9140006031330	ZIMFLORA CO OPERATIVE CO LIMIT	OD005-Business Banking Current Account
Debit amount	Total transfer amount	
350.00 (USD)	350.00 (USD)	
Debit account currency	Transfer currency	Debit reference
USD	USD	AMA Licence 2025
BIC (SWIFT)		
SBICZWHX		

Transaction details

Transaction id.	Beneficiary code	Beneficiary name
2	AMA FCA	Agricultural Marketing Authority
Beneficiary type	Beneficiary entity category	Beneficiary nationality
Pre-defined		
	Account number	Account type
	01122829630098	
Account currency	Sort Code	BIC (SWIFT)
USD	06101	COBZZWHA
Beneficiary bank name	Beneficiary bank branch name	IBAN
CBZ BANK LIMITED	Kwame Nkrumah Avenue	
Transfer amount		Beneficiary reference
350.00		Zimflora AMA Licence
Transaction type	ISN/Bus Ref	Submission mechanism
RTGS		Online capture
Transaction status		

Disclaimer

This is an interim payment report intended for record keeping purposes only and is not a proof of payment.

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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 Kwame Nkrumah Ave	Beneficiary bank address	
Balance of Payment reason		

Pay alert details

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

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