

Payment instruction - Detailed report

Batch details

Batch id	Date & time created	Payment type
75304741	06/11/2025 08:30:08 AM CAT	SUSTAINABLE AFFORESTATION ASS
No. of instructions	Customer batch reference	Submission mechanism
1		Online capture
Last modified date	Amount	Currency
06/11/2025	5,933.30	ZWG
Date & Time submitted	Date & Time accepted	Status
06/11/2025 09:11:19 AM CAT	06/11/2025 09:11:18 AM CAT	Processed - Feedback outstanding

Instruction details

Instruction id.	Value date	Status
83653349	06/11/2025	Delivered for processing - Feedback outstanding
No. of transactions	Service level	Authoriser
1	Urgent	[BLESSING MUTOSVORI, LENIN MAUNGANIDZE]
Credit amount	Charges paid by	Submission mechanism
5,933.30 (ZWG)	OUR	Online capture
Funding option		
Available funds		

Pay from

Account number	Account name	Account type
9140001536353	SUSTAINABLE AFFORESTATION ASSOCIATION	OD005-Business Banking Current Account
Debit amount	Total transfer amount	Debit reference
5,933.30 (ZWG)	5,933.30 (ZWG)	Balance small scale permits
Debit account currency	Transfer currency	
ZWG	ZWG	
BIC (SWIFT)		
SBICZWHX		

Transaction details

Transaction id.	Beneficiary code	Beneficiary name
2	ama	Agricultural marketing Authority
Beneficiary type	Beneficiary entity category	Beneficiary nationality
Pre-defined		
	Account number	Account type
	01122829630018	
Account currency	Sort Code	BIC (SWIFT)
ZWG	06101	COBZZWHA
Beneficiary bank name	Beneficiary bank branch name	IBAN
CBZ BANK LIMITED	Kwame Nkrumah Avenue	
Transfer amount		Beneficiary reference
5,933.30		saa
Transaction type	ISN/Bus Ref	Submission mechanism

Disclaimer

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

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RTGS

Transaction status

**Delivered for processing - Feedback
outstanding****Online capture**

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

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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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