

**Date:** 29/03/2021      **File Type:** PPS  
**Payment Date:** 29/03/2021      **File Name:** CAW08011.txt

No.	Beneficiary Name	Credit Bank Code	Credit Account Number	Amount	Debit Bank Code	Reference/EFT Number
1	ARCHITECT CENTRE SDN BHD	MYBB	514299132032	20,000.00	CIMB	2NPCAW0014001

**Funding Summary**

No.	Bank Name	Account No	Type	Transactions	Amount	Fees	Total Amount
1	CIMB BANK	8600479466	IBG	1	20,000.00	0.80	20,000.80
Total				1	20,000.00	0.80	20,000.80

Total Transactions	1
Total Amount (RM)	20,000.00
Total Fees (RM)	0.80
Total Payable (RM)	20,000.80

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**Beneficiary Email**

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