



Number OF Transactions: 2
 Beneficiary Name: ZACHAROPLASTION ARISTON LTD
 Beneficiary IBAN: CY03008001010000000000008041
 Payment Mode: Bank Transfer
 Commission Value: 5.00
 Reference Number: SO - 208204
 Date/Time: 2021/12/02 03:26
 Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/12/01	ENGOMI	11:41	6062984	649259	Cashier	ENGOMI	15.40	0.77	0.12	14.51
		Total/Branch					15.40	0.77	0.12	14.51
	NICOSIA	15:28	6066263	889789	Cashier	NICOSIA	25.00	1.25	0.19	23.56
		Total/Branch					25.00	1.25	0.19	23.56
	Total/Date						40.40	2.02	0.31	38.07
Total							40.40	2.02	0.31	38.07