



Number OF Transactions: 5
Beneficiary Name: FARMAKEFTIKI ORGANOSI KYPROU LIMITED
Beneficiary IBAN: CY13008001600000000000006919
Payment Mode: Bank Transfer
Commission Value: 15.00
Reference Number: SO - 148997
Date/Time: 2021/12/14 03:29
Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Amount	Commission	Fee	Net Amount
2021/12/10	MY MALL LIMASSOL	19:10	6223394	22.00	3.30	0.07	18.63
		Total/Branch		22.00	3.30	0.07	18.63
	NICOSIA MALL	16:51	6219235	35.50	5.32	0.11	30.07
		Total/Branch		35.50	5.32	0.11	30.07
	Total/Date			57.50	8.62	0.18	48.70
2021/12/11	2338	14:41	6236109	10.00	1.50	0.03	8.47
		Total/Branch		10.00	1.50	0.03	8.47
	Total/Date			10.00	1.50	0.03	8.47
2021/12/13	MY MALL LIMASSOL	18:57	6263312	12.50	1.88	0.04	10.58
		Total/Branch		12.50	1.88	0.04	10.58

Merchant Standing Order Payment Report

2021/12/13	NICOSIA MALL	17:12	6262062	26.50	3.98	0.08	22.44
		Total/Branc h		26.50	3.98	0.08	22.44
	Total/Date			39.00	5.86	0.12	33.02
Total				106.50	15.98	0.33	90.19