Merchant Standing Order Payment Report

Number OF Transactions: 4
Beneficiary Name: Anthirs Protasis
Beneficiary IBAN: CY20005003140003140 1A6310901
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 148997
Date/Time: 2021/12/14 03:29
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/12/10	LEOF GRIVA DIGENI 47	18:17	6222697	333823	Cashier	cashier1	25.00	2.50	0.14	22.36
		Total/Branch					25.00	2.50	0.14	22.36
	Total/Date						25.00	2.50	0.14	22.36
2021/12/11	87, SPIROU KYPRIANOU AV.	12:02	6233439	589833	Cashier	cashier2	11.40	1.14	0.06	10.20
		Total/Branch					11.40	1.14	0.06	10.20
	Total/Date						11.40	1.14	0.06	10.20
2021/12/13	87, SPIROU KYPRIANOU AV.	19:05	6263409	355847	Cashier	cashier2	25.00	2.50	0.14	22.36
		Total/Branch					25.00	2.50	0.14	22.36

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2021/12/13	LEOF GRIVA DIGENI 47	17:03	6261947	538847	Cashier	cashier1	8.50	0.85	0.05	7.60
		Total/Branch					8.50	0.85	0.05	7.60
	Total/Date						33.50	3.35	0.19	29.96
Total							69.90	6.99	0.39	62.52

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