



Number OF Transactions: 5
Beneficiary Name: FARMAKEFTIKI ORGANOSI KYPROU LIMITED
Beneficiary IBAN: CY13008001600000000000006919
Payment Mode: Bank Transfer
Commission Value: 15.00
Reference Number: SO - 537397
Date/Time: 2021/12/21 04:06
Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Amount	Commission	Fee	Net Amount
2021/12/18	2338	15:59	6349435	18.50	2.78	0.06	15.66
		Total/Branch		18.50	2.78	0.06	15.66
	MY MALL LIMASSOL	14:11	6347825	21.50	3.22	0.06	18.22
		Total/Branch		21.50	3.22	0.06	18.22
	Total/Date			40.00	6.00	0.12	33.88
2021/12/19	2338	19:23	6362924	59.00	8.85	0.18	49.97
		Total/Branch		59.00	8.85	0.18	49.97
	NICOSIA MALL	16:57	6361266	8.00	1.20	0.02	6.78
		Total/Branch		8.00	1.20	0.02	6.78
	Total/Date			67.00	10.05	0.20	56.75

Merchant Standing Order Payment Report

2021/12/20	MY MALL LIMASSOL	16:22	6375056	19.50	2.92	0.06	16.52
		Total/Branch		19.50	2.92	0.06	16.52
		Total/Date		19.50	2.92	0.06	16.52
Total				126.50	18.97	0.38	107.15