Merchant Standing Order Payment Report

Number OF Transactions: 1
Beneficiary Name: ZACHAROPLASTION ARISTON LTD
Beneficiary IBAN: CY03008001010000000000008041
Payment Mode: Bank Transfer
Commission Value: 5.00
Reference Number: SO - 453686
Date/Time: 2021/12/23 03:52
Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/12/22	ENGOMI	19:22	6416308	763222	Cashier	ENGOMI	4.20	0.21	0.03	3.96
		Total/Branch					4.20	0.21	0.03	3.96
	Total/Date						4.20	0.21	0.03	3.96
Total							4.20	0.21	0.03	3.96

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