



Number OF Transactions: 5
Beneficiary Name: STAROYLA DAMIANOY
Beneficiary IBAN: CY09005003680003681087560101
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 336777
Date/Time: 2021/12/24 03:56
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/12/23	25 March 44	09:05	6424866	666754	SuperAdmin	Admin	2.00	0.01	1.99
		11:43	6427815	735385	SuperAdmin	Admin	2.00	0.01	1.99
		13:21	6429438	554669	SuperAdmin	Admin	4.40	0.03	4.37
		15:16	6431352	235472	SuperAdmin	Admin	4.50	0.03	4.47
		16:54	6432811	883358	SuperAdmin	Admin	2.00	0.01	1.99
		Total/Branch					14.90	0.09	14.81
	Total/Date						14.90	0.09	14.81
Total							14.90	0.09	14.81