



Number OF Transactions: 1
Beneficiary Name: STAROYLA DAMIANOY
Beneficiary IBAN: CY09005003680003681087560101
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 158450
Date/Time: 2022/01/13 03:43
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2022/01/12	44, 25th March str., Aradippou	07:15	6735627	653574	SuperAdmin	Admin	2.00	0.01	1.99
		Total/Branch					2.00	0.01	1.99
	Total/Date						2.00	0.01	1.99
Total							2.00	0.01	1.99