



Number OF Transactions: 3
Beneficiary Name: STAROYLA DAMIANOY
Beneficiary IBAN: CY09005003680003681087560101
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 023765
Date/Time: 2022/01/19 03:51
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2022/01/18	44, 25th March str., Aradippou	07:22	6824807	346439	SuperAdmin	Admin	3.00	0.02	2.98
		07:26	6824849	458237	SuperAdmin	Admin	2.00	0.01	1.99
		07:52	6825019	585847	SuperAdmin	Admin	4.00	0.03	3.97
		Total/Branch					9.00	0.06	8.94
	Total/Date						9.00	0.06	8.94
Total							9.00	0.06	8.94