



Number OF Transactions: 2
Beneficiary Name: STAROYLA DAMIANOY
Beneficiary IBAN: CY09005003680003681087560101
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 742765
Date/Time: 2022/01/20 03:59
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2022/01/19	44, 25th March str., Aradippou	07:21	6843550	296586	SuperAdmin	Admin	2.00	0.01	1.99
		19:08	6852257	447937	SuperAdmin	Admin	8.40	0.06	8.34
		Total/Branch					10.40	0.07	10.33
	Total/Date						10.40	0.07	10.33
Total							10.40	0.07	10.33