Merchant Standing Order Payment Report

Number OF Transactions: 1
Beneficiary Name: GABELEN LIMITED
Beneficiary IBAN: CY40005002410002410185465201
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 020539
Date/Time: 2022/02/08 04:00
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2022/02/04	17 Ifigenias St., 3036	14:56	7124543	856667	SuperAdmin	Admin	2.50	0.25	0.01	2.24
		Total/Branch					2.50	0.25	0.01	2.24
	Total/Date						2.50	0.25	0.01	2.24
Total							2.50	0.25	0.01	2.24

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