


SO Payment Details

Payment Mode : Bank Transfer
Beneficiary Name : STAROYLA DAMIANOY
Beneficiary Bank Name : HELLENIC BANK PUBLIC COMPANY LTD
Beneficiary IBAN : CY09005003680003681087560101
Date/Time : 2020/12/22 04:00
Reference Number : SO - 551145
Number Of Transactions : 2
Commission Value: 10.00%
Rate: 0.70%

Date	Branch	Time	Merchant User Type	Merchant User	TranID	Amount (€)	Tips (€)	Commission	Fee	Net Amount
2020/12/21	25 March 44	09:40	SuperAdmin	Admin	1642858	8.50	0.00	0.85	0.05	7.60
		17:29	SuperAdmin	Admin	1646786	6.00	0.00	0.60	0.04	5.36
		Total/Branch				14.50	0.00	1.45	0.09	12.96
	Total/Date					14.50	0.00	1.45	0.09	12.96
Total						14.50	0.00	1.45	0.09	12.96