


SO Payment Details

Payment Mode : Bank Transfer
Beneficiary Name : CHRISTOFHs CHRISTOFH
Beneficiary Bank Name : HELLENIC BANK PUBLIC COMPANY LTD
Beneficiary IBAN : CY63005003680003681075315401
Date/Time : 2020/12/31 03:32
Reference Number : SO - 428265
Number Of Transactions : 1
Commission Value: 15.00%
Rate: 0.60%

Date	Branch	Time	Merchant User Type	Merchant User	TranID	Amount (€)	Tips (€)	Commission	Fee	Net Amount
2020/12/30	Leoforos Papanikoli 9	13:39	SuperAdmin	Admin	1733067	10.00	0.00	1.50	0.05	8.45
		Total/Branch				10.00	0.00	1.50	0.05	8.45
		Total/Date				10.00	0.00	1.50	0.05	8.45
Total						10.00	0.00	1.50	0.05	8.45