


SO Payment Details

Payment Mode : Bank Transfer
Beneficiary Name : STAROYLA DAMIANOY
Beneficiary Bank Name : HELLENIC BANK PUBLIC COMPANY LTD
Beneficiary IBAN : CY09005003680003681087560101
Date/Time : 2021/02/04 03:57
Reference Number : SO - 306079
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
2021/02/03	25 March 44	08:50	SuperAdmin	Admin	2024894	2.00	0.00	0.20	0.01	1.79
		09:10	SuperAdmin	Admin	2025015	2.00	0.00	0.20	0.01	1.79
		Total/Branch				4.00	0.00	0.40	0.02	3.58
	Total/Date					4.00	0.00	0.40	0.02	3.58
Total						4.00	0.00	0.40	0.02	3.58