


SO Payment Details

Payment Mode : Bank Transfer
Beneficiary Name : STAROYLA DAMIANOY
Beneficiary Bank Name : HELLENIC BANK PUBLIC COMPANY LTD
Beneficiary IBAN : CY09005003680003681087560101
Date/Time : 2021/02/10 03:53
Reference Number : SO - 111044
Number Of Transactions : 3
Commission Value: 10.00%
Rate: 0.70%

Date	Branch	Time	Merchant User Type	Merchant User	TranID	Amount (€)	Tips (€)	Commission	Fee	Net Amount
2021/02/09	25 March 44	07:18	SuperAdmin	Admin	2085260	2.00	0.00	0.20	0.01	1.79
		09:17	SuperAdmin	Admin	2086002	2.00	0.00	0.20	0.01	1.79
		15:15	SuperAdmin	Admin	2089717	2.00	0.00	0.20	0.01	1.79
		Total/Branch				6.00	0.00	0.60	0.03	5.37
	Total/Date					6.00	0.00	0.60	0.03	5.37
Total						6.00	0.00	0.60	0.03	5.37