



Number OF Transactions: 1
 Beneficiary Name: GABELEN LIMITED
 Beneficiary Bank Name: Hellenic Bank Public Company LTD
 Beneficiary IBAN: CY40005002410002410185465201
 Payment Mode: Bank Transfer
 Commission Value: 10.0000
 Reference Number: SO - 301955
 Date/Time: 2021/02/12 03:58

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/02/11	Ifigenias 12 A Lemassol	13:48	2111089	472864	SuperAdmin	Admin	6.5000	0.6500	0.0400	5.8100
		Total/Branch					6.5000	0.6500	0.0400	5.8100
	Total/Date						6.5000	0.6500	0.0400	5.8100
Total							6.5000	0.6500	0.0400	5.8100