



Number OF Transactions: 5
Beneficiary Name: STAROYLA DAMIANOY
Beneficiary IBAN: CY09005003680003681087560101
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 142119
Date/Time: 2021/02/16 03:23
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/02/15	25 March 44	07:32	2149896	538583	SuperAdmin	Admin	2.00	0.20	0.01	1.79
		08:22	2150520	563636	SuperAdmin	Admin	4.50	0.45	0.03	4.02
		09:41	2150902	567885	SuperAdmin	Admin	4.00	0.40	0.03	3.57
		17:32	2156670	224554	SuperAdmin	Admin	6.50	0.65	0.04	5.81
		17:57	2156961	872738	SuperAdmin	Admin	2.50	0.25	0.02	2.23
		Total/Branch					19.50	1.95	0.13	17.42
	Total/Date						19.50	1.95	0.13	17.42
Total							19.50	1.95	0.13	17.42