Merchant Standing Order Payment Report

Number OF Transactions: 1
Beneficiary Name: GABELEN LIMITED
Beneficiary IBAN: CY40005002410002410185465201
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 005849
Date/Time: 2021/02/24 03:48
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/02/23	Ifigenias 12 A Lemassol	13:11	2242205	238785	SuperAdmin	Admin	10.50	1.05	0.06	9.39
		Total/Branch					10.50	1.05	0.06	9.39
	Total/Date						10.50	1.05	0.06	9.39
Total							10.50	1.05	0.06	9.39

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