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 - 056375
Date/Time: 2021/03/05 03:12
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/03/04	Ifigenias 12 A Lemassol	19:50	2366836	666645	SuperAdmin	Admin	7.50	0.75	0.04	6.71
		Total/Branch					7.50	0.75	0.04	6.71
	Total/Date						7.50	0.75	0.04	6.71
Total							7.50	0.75	0.04	6.71

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