Merchant Standing Order Payment Report

Number OF Transactions: 1
Beneficiary Name: STAROYLA DAMIANOY
Beneficiary IBAN: CY09005003680003681087560101
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 421758
Date/Time: 2021/03/09 03:54
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/03/08	25 March 44	17:58	2414909	479334	SuperAdmin	Admin	6.00	0.60	0.04	5.36
		Total/Branch					6.00	0.60	0.04	5.36
	Total/Date						6.00	0.60	0.04	5.36
Total							6.00	0.60	0.04	5.36

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