



Number OF Transactions: 4
 Beneficiary Name: STAROYLA DAMIANOY
 Beneficiary IBAN: CY09005003680003681087560101
 Payment Mode: Bank Transfer
 Commission Value: 10.00
 Reference Number: SO - 810182
 Date/Time: 2021/03/10 04:00
 Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/03/09	25 March 44	07:15	2423442	643622	SuperAdmin	Admin	2.00	0.20	0.01	1.79
		09:48	2424411	436665	SuperAdmin	Admin	2.00	0.20	0.01	1.79
		18:02	2429881	644846	SuperAdmin	Admin	4.50	0.45	0.03	4.02
		19:08	2430756	848533	SuperAdmin	Admin	10.50	1.05	0.07	9.38
		Total/Branch					19.00	1.90	0.12	16.98
	Total/Date						19.00	1.90	0.12	16.98
Total							19.00	1.90	0.12	16.98