



Number OF Transactions: 1
 Beneficiary Name: STAROYLA DAMIANOY
 Beneficiary IBAN: CY09005003680003681087560101
 Payment Mode: Bank Transfer
 Commission Value: 10.00
 Reference Number: SO - 558849
 Date/Time: 2021/04/01 03:34
 Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/03/31	25 March 44	11:42	2705287	476258	SuperAdmin	Admin	7.30	0.73	0.05	6.52
		Total/Branch					7.30	0.73	0.05	6.52
	Total/Date						7.30	0.73	0.05	6.52
Total							7.30	0.73	0.05	6.52