

Number OF Transactions: 3
Beneficiary Name: Anthirs Protasis
Beneficiary IBAN: CY200050031400031401A6310901
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 516364
Date/Time: 2021/04/06 03:08
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/04/02	LEOF GRIVA DIGENI 47	15:26	2737735	324684	SuperAdmin	Admin	24.00	2.40	0.13	21.47
		17:17	2739174	377588	SuperAdmin	Admin	47.30	4.73	0.26	42.31
		Total/Branch					71.30	7.13	0.39	63.78
	Total/Date						71.30	7.13	0.39	63.78
2021/04/04	LEOF GRIVA DIGENI 47	18:22	2766886	295245	SuperAdmin	Admin	25.00	2.50	0.14	22.36
		Total/Branch					25.00	2.50	0.14	22.36
	Total/Date						25.00	2.50	0.14	22.36
Total							96.30	9.63	0.53	86.14