Merchant Standing Order Payment Report

Number OF Transactions: 2
Beneficiary Name: GABELEN LIMITED
Beneficiary IBAN: CY40005002410002410185465201
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 041981
Date/Time: 2021/04/09 03:22
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/04/08	Ifigenias 12 A Lemassol	12:26	2827955	593334	SuperAdmin	Admin	5.00	0.50	0.03	4.47
		21:06	2834493	824379	SuperAdmin	Admin	5.00	0.50	0.03	4.47
		Total/Branch					10.00	1.00	0.06	8.94
	Total/Date						10.00	1.00	0.06	8.94
Total							10.00	1.00	0.06	8.94

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