Merchant Standing Order Payment Report

Number OF Transactions: 1
Beneficiary Name: GABELEN LIMITED
Beneficiary IBAN: CY40005002410002410185465201
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 705779
Date/Time: 2021/04/21 03:29
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/04/20	Ifigenias 12 A Lemassol	13:21	3007094	286255	SuperAdmin	Admin	31.50	3.15	0.17	28.18
		Total/Branch					31.50	3.15	0.17	28.18
	Total/Date						31.50	3.15	0.17	28.18
Total							31.50	3.15	0.17	28.18

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