



Number OF Transactions: 3
Beneficiary Name: STAROYLA DAMIANOY
Beneficiary IBAN: CY09005003680003681087560101
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 858124
Date/Time: 2021/05/13 03:31
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/05/12	25 March 44	11:31	3317006	793686	SuperAdmin	Admin	2.50	0.25	0.02	2.23
		12:57	3318054	564497	SuperAdmin	Admin	2.00	0.20	0.01	1.79
		16:51	3321203	547286	SuperAdmin	Admin	4.30	0.43	0.03	3.84
		Total/Branch					8.80	0.88	0.06	7.86
	Total/Date						8.80	0.88	0.06	7.86
Total							8.80	0.88	0.06	7.86