



Number OF Transactions: 1
Beneficiary Name: DIASKEDAZW LTD
Beneficiary IBAN: CY98005001390001390183809601
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 054097
Date/Time: 2021/05/24 03:54
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Amount	Commission	Fee	Net Amount
2021/05/22	Achaion 49 Kato Lakatamia	13:44	3489456	9175	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					25.00	2.50	0.14	22.36