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 - 921599
Date/Time: 2021/06/10 03:32
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/06/09	Ifigenias 12 A Lemassol	13:41	3760961	843785	SuperAdmin	Admin	8.00	0.80	0.04	7.16
		14:29	3761369	843967	SuperAdmin	Admin	2.00	0.20	0.01	1.79
		Total/Branch					10.00	1.00	0.05	8.95
	Total/Date						10.00	1.00	0.05	8.95
Total							10.00	1.00	0.05	8.95

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