Merchant Standing Order Payment Report

Number OF Transactions: 3
Beneficiary Name: GABELEN LIMITED
Beneficiary IBAN: CY40005002410002410185465201
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 045623
Date/Time: 2021/06/16 03:15
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/06/15	Ifigenias 12 A Lemassol	10:39	3832170	276257	SuperAdmin	Admin	18.00	1.80	0.10	16.10
		20:32	3838451	594625	SuperAdmin	Admin	14.50	1.45	0.08	12.97
		21:15	3838881	259879	SuperAdmin	Admin	7.00	0.70	0.04	6.26
		Total/Branch					39.50	3.95	0.22	35.33
	Total/Date						39.50	3.95	0.22	35.33
Total							39.50	3.95	0.22	35.33

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