

Number OF Transactions: 4
Beneficiary Name: Anthirs Protasis
Beneficiary IBAN: CY200050031400031401A6310901
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 007509
Date/Time: 2021/07/06 03:46
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/07/02	LEOF GRIVA DIGENI 47	20:50	4056594	694765	SuperAdmin	Admin	22.00	2.20	0.12	19.68
		Total/Branch					22.00	2.20	0.12	19.68
		Total/Date					22.00	2.20	0.12	19.68
2021/07/03	LEOF GRIVA DIGENI 47	17:23	4068007	683656	SuperAdmin	Admin	7.80	0.78	0.04	6.98
		17:36	4068141	932536	SuperAdmin	Admin	22.60	2.26	0.12	20.22
		Total/Branch					30.40	3.04	0.16	27.20
		Total/Date					30.40	3.04	0.16	27.20

Merchant Standing Order Payment Report

2021/07/05	LEOF GRIVA DIGENI 47	14:59	4087198	829683	SuperAdmin	Admin	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							77.40	7.74	0.42	69.24