



Number OF Transactions: 6
Beneficiary Name: STAROYLA DAMIANOY
Beneficiary IBAN: CY09005003680003681087560101
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 821190
Date/Time: 2021/07/13 03:41
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/07/09	25 March 44	11:20	4142204	543564	SuperAdmin	Admin	2.00	0.20	0.01	1.79
		20:38	4147885	734329	SuperAdmin	Admin	10.50	1.05	0.07	9.38
		Total/Branch					12.50	1.25	0.08	11.17
	Total/Date						12.50	1.25	0.08	11.17
2021/07/10	25 March 44	09:19	4153706	456844	SuperAdmin	Admin	2.50	0.25	0.02	2.23
		09:19	4153710	543464	SuperAdmin	Admin	2.50	0.25	0.02	2.23
		Total/Branch					5.00	0.50	0.04	4.46
	Total/Date						5.00	0.50	0.04	4.46

Merchant Standing Order Payment Report

2021/07/11	25 March 44	16:21	4167346	833857	SuperAdmin	Admin	4.00	0.40	0.03	3.57
		18:28	4168453	438669	SuperAdmin	Admin	2.00	0.20	0.01	1.79
		Total/Branch					6.00	0.60	0.04	5.36
	Total/Date						6.00	0.60	0.04	5.36
Total							23.50	2.35	0.16	20.99