Merchant Standing Order Payment Report

Number OF Transactions: 1
Beneficiary Name: GABELEN LIMITED
Beneficiary IBAN: CY40005002410002410185465201
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 841612
Date/Time: 2021/07/20 03:55
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/07/17	Ifigenias 12 A Lemassol	19:50	4247730	549672	SuperAdmin	Admin	13.40	1.34	0.07	11.99
		Total/Branch					13.40	1.34	0.07	11.99
	Total/Date						13.40	1.34	0.07	11.99
Total							13.40	1.34	0.07	11.99

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