Merchant Standing Order Payment Report

Number OF Transactions: 1

Beneficiary Name: FARMAKEFTIKI ORGANOSI KYPROU LIMITED

Beneficiary IBAN: CY13008001600000000000006919

Payment Mode: Bank Transfer

Commission Value: 15.00

Reference Number: SO - 146286

Date/Time: 2021/07/30 03:56

Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Amount	Commission	Fee	Net Amount
2021/07/29	LEOFOROS LIMASSOL	19:14	4386550	28.50	4.28	0.08	24.14
		Total/Branch		28.50	4.28	0.08	24.14
	Total/Date			28.50	4.28	0.08	24.14
Total				28.50	4.28	0.08	24.14

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