

Number OF Transactions: 5
Beneficiary Name: Anthirs Protasis
Beneficiary IBAN: CY200050031400031401A6310901
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 820937
Date/Time: 2021/08/03 04:01
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/07/30	LEOF GRIVA DIGENI 47	13:50	4397100	754675	SuperAdmin	Admin	6.00	0.60	0.03	5.37
		17:57	4399552	427737	SuperAdmin	Admin	14.50	1.45	0.08	12.97
		20:41	4401278	865635	SuperAdmin	Admin	20.00	2.00	0.11	17.89
		Total/Branch					40.50	4.05	0.22	36.23
	Total/Date						40.50	4.05	0.22	36.23
2021/07/31	LEOF GRIVA DIGENI 47	09:31	4408735	786354	SuperAdmin	Admin	11.90	1.19	0.06	10.65
		Total/Branch					11.90	1.19	0.06	10.65
	Total/Date						11.90	1.19	0.06	10.65

Merchant Standing Order Payment Report

2021/08/02	LEOF GRIVA DIGENI 47	12:29	4432655	473654	SuperAdmin	Admin	34.50	3.45	0.19	30.86
		Total/Branch					34.50	3.45	0.19	30.86
	Total/Date					34.50	3.45	0.19	30.86	
Total							86.90	8.69	0.47	77.74