

Number OF Transactions: 4
Beneficiary Name: Anthirs Protasis
Beneficiary IBAN: CY200050031400031401A6310901
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 503151
Date/Time: 2021/08/05 03:17
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/08/04	LEOF GRIVA DIGENI 47	10:45	4462623	468466	SuperAdmin	Admin	60.00	6.00	0.32	53.68
		13:10	4464812	673668	SuperAdmin	Admin	25.00	2.50	0.14	22.36
		16:18	4466458	348335	SuperAdmin	Admin	3.50	0.35	0.02	3.13
		16:19	4466465	746257	SuperAdmin	Admin	0.50	0.05	0.01	0.44
		Total/Branch					89.00	8.90	0.49	79.61
	Total/Date						89.00	8.90	0.49	79.61
Total							89.00	8.90	0.49	79.61