Merchant Standing Order Payment Report

Number OF Transactions: 5

Beneficiary Name: FARMAKEFTIKI ORGANOSI KYPROU LIMITED

Beneficiary IBAN: CY13008001600000000000006919

Payment Mode: Bank Transfer

Commission Value: 15.00

Reference Number: SO - 320622

Date/Time: 2021/08/12 03:36

Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Amount	Commission	Fee	Net Amount
2021/08/11	MY MALL LIMASSOL	12:23	4551506	23.00	3.45	0.07	19.48
		Total/Branch		23.00	3.45	0.07	19.48
	NICOSIA MALL	13:36	4552163	10.00	1.50	0.03	8.47
		16:41	4553635	35.00	5.25	0.10	29.65
		17:01	4553786	20.50	3.08	0.06	17.36
		17:02	4553797	19.50	2.92	0.06	16.52
		Total/Branch		85.00	12.75	0.25	72.00
	Total/Date			108.00	16.20	0.32	91.48
Total				108.00	16.20	0.32	91.48

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