



Number OF Transactions: 1  
 Beneficiary Name: STAROYLA DAMIANOY  
 Beneficiary IBAN: CY09005003680003681087560101  
 Payment Mode: Bank Transfer  
 Commission Value: 10.00  
 Reference Number: SO - 340530  
 Date/Time: 2021/08/18 03:47  
 Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

| Date       | Branch      | Time         | TranID  | Order ID | Merchant User Type | Merchant User | Amount | Commission | Fee  | Net Amount |
|------------|-------------|--------------|---------|----------|--------------------|---------------|--------|------------|------|------------|
| 2021/08/17 | 25 March 44 | 19:09        | 4622449 | 737383   | SuperAdmin         | Admin         | 4.10   | 0.41       | 0.03 | 3.66       |
|            |             | Total/Branch |         |          |                    |               | 4.10   | 0.41       | 0.03 | 3.66       |
|            | Total/Date  |              |         |          |                    |               | 4.10   | 0.41       | 0.03 | 3.66       |
| Total      |             |              |         |          |                    |               | 4.10   | 0.41       | 0.03 | 3.66       |