Merchant Standing Order Payment Report

Number OF Transactions: 2
Beneficiary Name: STAROYLA DAMIANOY
Beneficiary IBAN: CY09005003680003681087560101
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 800239
Date/Time: 2021/08/19 03:50
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/08/18	25 March 44	11:17	4629284	372583	SuperAdmin	Admin	3.50	0.35	0.02	3.13
		14:44	4631931	858938	SuperAdmin	Admin	6.00	0.60	0.04	5.36
		Total/Branch					9.50	0.95	0.06	8.49
	Total/Date						9.50	0.95	0.06	8.49
Total							9.50	0.95	0.06	8.49

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