Merchant Standing Order Payment Report

Number OF Transactions: 2

Beneficiary Name: FARMAKEFTIKI ORGANOSI KYPROU LIMITED

Beneficiary IBAN: CY13008001600000000000006919

Payment Mode: Bank Transfer

Commission Value: 15.00

Reference Number: SO - 810860

Date/Time: 2021/09/08 03:33

Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Amount	Commission	Fee	Net Amount
2021/09/07	MY MALL LIMASSOL	18:28	4883568	35.00	5.25	0.10	29.65
		18:31	4883615	10.00	1.50	0.03	8.47
		Total/Branch		45.00	6.75	0.13	38.12
	Total/Date			45.00	6.75	0.13	38.12
Total				45.00	6.75	0.13	38.12

57, John Kennedy Avenue, 3rd Floor
1076, Nicosia, Cyprus
Tel: +357 22 27 67 37
Fax: +357 22 27 67 35
Email: contact@skash.com