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 - 510023
Date/Time: 2021/09/24 03:49
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/09/23	25 March 44	13:22	5077722	657247	SuperAdmin	Admin	2.00	0.20	0.01	1.79
		19:13	5080877	353685	SuperAdmin	Admin	6.10	0.61	0.04	5.45
		Total/Branch					8.10	0.81	0.05	7.24
	Total/Date						8.10	0.81	0.05	7.24
Total							8.10	0.81	0.05	7.24

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