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 - 208937

Date/Time: 2021/09/30 03:17

Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Amount	Commission	Fee	Net Amount
2021/09/29	2338	14:13	5154296	60.00	9.00	0.18	50.82
		Total/Branch		60.00	9.00	0.18	50.82
	MY MALL LIMASSOL	17:00	5156150	10.00	1.50	0.03	8.47
		Total/Branch		10.00	1.50	0.03	8.47
	Total/Date			70.00	10.50	0.21	59.29
Total				70.00	10.50	0.21	59.29

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