Merchant Standing Order Payment Report

Number OF Transactions: 1

Beneficiary Name: FARMAKEFTIKI ORGANOSI KYPROU LIMITED

Beneficiary IBAN: CY13008001600000000000006919

Payment Mode: Bank Transfer

Commission Value: 15.00

Reference Number: SO - 436366

Date/Time: 2021/10/08 03:40

Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Amount	Commission	Fee	Net Amount
2021/10/07	LEOFOROS LIMASSOL	19:28	5275189	5.00	0.75	0.01	4.24
		Total/Branch		5.00	0.75	0.01	4.24
	Total/Date			5.00	0.75	0.01	4.24
Total				5.00	0.75	0.01	4.24

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