Merchant Standing Order Payment Report

Number OF Transactions: 2
Beneficiary Name: GABELEN LIMITED
Beneficiary IBAN: CY40005002410002410185465201
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 914961
Date/Time: 2021/10/14 04:04
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/10/13	Ifigenias 17 Limassol	14:09	5350390	998256	SuperAdmin	Admin	4.00	0.40	0.02	3.58
		14:12	5350410	688974	SuperAdmin	Admin	0.50	0.05	0.01	0.44
		Total/Branch					4.50	0.45	0.03	4.02
	Total/Date						4.50	0.45	0.03	4.02
Total							4.50	0.45	0.03	4.02

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