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 - 620063
Date/Time: 2021/10/15 03:10
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/10/14	Ifigenias 17 Limassol	12:56	5362829	844576	SuperAdmin	Admin	3.00	0.30	0.02	2.68
		13:14	5363072	484375	SuperAdmin	Admin	2.00	0.20	0.01	1.79
		Total/Branch					5.00	0.50	0.03	4.47
	Total/Date						5.00	0.50	0.03	4.47
Total							5.00	0.50	0.03	4.47

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