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 - 905745

Date/Time: 2021/10/20 03:33

Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Amount	Commission	Fee	Net Amount
2021/10/19	KINGS AVENUE MALL PAPHOS	18:04	5429732	35.50	5.32	0.11	30.07
		Total/Branch		35.50	5.32	0.11	30.07
	MY MALL LIMASSOL	12:13	5425701	26.00	3.90	0.08	22.02
		Total/Branch		26.00	3.90	0.08	22.02
	Total/Date			61.50	9.22	0.19	52.09
Total				61.50	9.22	0.19	52.09

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