



Number OF Transactions: 2
 Beneficiary Name: ZACHAROPLASTION ARISTON LTD
 Beneficiary IBAN: CY03008001010000000000008041
 Payment Mode: Bank Transfer
 Commission Value: 5.00
 Reference Number: SO - 816520
 Date/Time: 2021/10/26 03:58
 Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/10/24	ENGOMI	13:05	5488888	447446	Cashier	ENGOMI	17.22	0.86	0.13	16.23
		Total/Branch					17.22	0.86	0.13	16.23
	NICOSIA	15:29	5490162	659333	Cashier	NICOSIA	4.70	0.24	0.04	4.42
		Total/Branch					4.70	0.24	0.04	4.42
	Total/Date						21.92	1.10	0.17	20.65
Total							21.92	1.10	0.17	20.65