Merchant Standing Order Payment Report

Number OF Transactions: 1
Beneficiary Name: ZACHAROPLASTION ARISTON LTD
Beneficiary IBAN: CY03008001010000000000008041
Payment Mode: Bank Transfer
Commission Value: 5.00
Reference Number: SO - 559451
Date/Time: 2021/10/29 03:48
Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/10/28	ENGOMI	10:48	5542081	633544	Cashier	ENGOMI	15.40	0.77	0.12	14.51
		Total/Branch					15.40	0.77	0.12	14.51
	Total/Date						15.40	0.77	0.12	14.51
Total							15.40	0.77	0.12	14.51

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