



Number OF Transactions: 1
 Beneficiary Name: STAROYLA DAMIANOY
 Beneficiary IBAN: CY09005003680003681087560101
 Payment Mode: Bank Transfer
 Commission Value: 10.00
 Reference Number: SO - 830892
 Date/Time: 2021/10/28 03:40
 Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/10/27	25 March 44	08:44	5527060	875235	SuperAdmin	Admin	2.30	0.02	2.28
		Total/Branch					2.30	0.02	2.28
	Total/Date						2.30	0.02	2.28
Total							2.30	0.02	2.28