



Number OF Transactions: 4
Beneficiary Name: STAROYLA DAMIANOY
Beneficiary IBAN: CY09005003680003681087560101
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 103290
Date/Time: 2021/11/04 03:12
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/11/03	25 March 44	07:22	5637035	865636	SuperAdmin	Admin	2.30	0.02	2.28
		07:51	5637227	275585	SuperAdmin	Admin	2.00	0.01	1.99
		10:13	5639155	946782	SuperAdmin	Admin	4.50	0.03	4.47
		14:59	5643138	966367	SuperAdmin	Admin	9.50	0.07	9.43
		Total/Branch					18.30	0.13	18.17
	Total/Date						18.30	0.13	18.17
Total							18.30	0.13	18.17