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 - 923412
Date/Time: 2021/11/18 03:46
Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/11/17	ENGOMI	18:56	5850388	456963	Cashier	ENGOMI	4.90	0.24	0.04	4.62
		Total/Branch					4.90	0.24	0.04	4.62
	Total/Date						4.90	0.24	0.04	4.62
Total							4.90	0.24	0.04	4.62

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