



Number OF Transactions: 5
Beneficiary Name: STAROYLA DAMIANOY
Beneficiary IBAN: CY09005003680003681087560101
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 706240
Date/Time: 2021/11/19 03:50
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/11/18	25 March 44	09:13	5858097	458855	SuperAdmin	Admin	1.00	0.01	0.99
		09:15	5858124	858663	SuperAdmin	Admin	5.00	0.04	4.96
		10:34	5858815	765686	SuperAdmin	Admin	2.30	0.02	2.28
		13:43	5861494	466258	SuperAdmin	Admin	2.00	0.01	1.99
		20:04	5865597	776884	SuperAdmin	Admin	6.60	0.05	6.55
		Total/Branch					16.90	0.13	16.77
	Total/Date						16.90	0.13	16.77
Total							16.90	0.13	16.77