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 - 637074
Date/Time: 2021/11/24 03:13
Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/11/23	ENGOMI	19:00	5933776	452347	Cashier	ENGOMI	8.10	0.40	0.06	7.64
		Total/Branch					8.10	0.40	0.06	7.64
	Total/Date						8.10	0.40	0.06	7.64
Total							8.10	0.40	0.06	7.64

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