



Number OF Transactions: 4
Beneficiary Name: STAROYLA DAMIANOY
Beneficiary IBAN: CY09005003680003681087560101
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 959913
Date/Time: 2021/11/30 03:35
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/11/27	25 March 44	08:03	5986180	968674	SuperAdmin	Admin	1.50	0.01	1.49
		Total/Branch					1.50	0.01	1.49
		Total/Date					1.50	0.01	1.49
2021/11/29	25 March 44	07:24	6012173	373735	SuperAdmin	Admin	2.00	0.01	1.99
		11:13	6017219	966835	SuperAdmin	Admin	2.00	0.01	1.99
		15:08	6020511	978983	SuperAdmin	Admin	2.50	0.02	2.48
		Total/Branch					6.50	0.04	6.46
		Total/Date					6.50	0.04	6.46
Total							8.00	0.05	7.95