Merchant Standing Order Payment Report

Number OF Transactions: 1
Beneficiary Name: Anthirs Protasis
Beneficiary IBAN: CY20005003140003140 1A6310901
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 206672
Date/Time: 2021/12/01 03:59
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Commission	Fee	Net Amount
2021/11/30	LEOF GRIVA DIGENI 47	16:05	6046866	565874	Cashier	cashier1	33.00	3.30	0.18	29.52
		Total/Branch					33.00	3.30	0.18	29.52
	Total/Date						33.00	3.30	0.18	29.52
Total							33.00	3.30	0.18	29.52

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