Merchant Standing Order Payment Report

Number OF Transactions: 1
Beneficiary Name: STAROYLA DAMIANOY
Beneficiary IBAN: CY09005003680003681087560101
Payment Mode: Bank Transfer
Commission Value: 10.00
Reference Number: SO - 206667
Date/Time: 2021/12/01 03:54
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/11/30	25 March 44	07:25	6037850	242984	SuperAdmin	Admin	2.00	0.01	1.99
		Total/Branch					2.00	0.01	1.99
	Total/Date						2.00	0.01	1.99
Total							2.00	0.01	1.99

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