



Number OF Transactions: 1
Beneficiary Name: QUALITAS MEDCARE LTD
Beneficiary IBAN: CY84002001950000357029792173
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 208204
Date/Time: 2021/12/02 03:28
Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/12/01	77 Arch. Makariou Av., Latsia	15:34	6066360	233252	SuperAdmin	mikel	2.40	0.01	2.39
		Total/Branch					2.40	0.01	2.39
	Total/Date						2.40	0.01	2.39
Total							2.40	0.01	2.39