



Number OF Transactions: 2
Beneficiary Name: QUALITAS MEDCARE LTD
Beneficiary IBAN: CY84002001950000357029792173
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 355974
Date/Time: 2021/12/09 03:10
Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/12/08	77 Arch. Makariou Av., Latsia	19:12	6188142	389748	SuperAdmin	mikel	3.30	0.02	3.28
		21:41	6189647	764622	SuperAdmin	mikel	5.60	0.03	5.57
		Total/Branch					8.90	0.05	8.85
	Total/Date						8.90	0.05	8.85
Total							8.90	0.05	8.85