

INGLOT

Number OF Transactions: 1
Beneficiary Name: FARMAKEFTIKI ORGANOSI KYPROU LTD
Beneficiary IBAN: CY130080016000000000000006919
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 537397
Date/Time: 2021/12/21 04:02
Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Amount	Fee	Net Amount
2021/12/17	MY MALL LIMASSOL	16:35	6332545	11.00	0.04	10.96
		Total/Branch		11.00	0.04	10.96
	Total/Date			11.00	0.04	10.96
Total				11.00	0.04	10.96