



Number OF Transactions: 3
Beneficiary Name: QUALITAS MEDCARE LTD
Beneficiary IBAN: CY84002001950000357029792173
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 300533
Date/Time: 2021/12/28 03:11
Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/12/25	77, Arch. Makariou III Av., Latsia	13:34	6465067	872738	SuperAdmin	mikel	3.40	0.02	3.38
		Total/Branch					3.40	0.02	3.38
		Total/Date					3.40	0.02	3.38
2021/12/27	77, Arch. Makariou III Av., Latsia	14:35	6486652	356658	SuperAdmin	mikel	7.00	0.04	6.96
		17:05	6488869	762438	SuperAdmin	mikel	5.60	0.03	5.57
		Total/Branch					12.60	0.07	12.53
		Total/Date					12.60	0.07	12.53
Total							16.00	0.09	15.91