



Number OF Transactions: 2
 Beneficiary Name: QUALITAS MEDCARE LTD
 Beneficiary IBAN: CY84002001950000357029792173
 Payment Mode: Bank Transfer
 Commission Value: 0.00
 Reference Number: SO - 158450
 Date/Time: 2022/01/13 03:44
 Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2022/01/12	77, Arch. Makariou III Av., Latsia	08:11	6736283	977479	SuperAdmin	mikel	6.10	0.03	6.07
		13:44	6740861	622679	SuperAdmin	mikel	2.40	0.01	2.39
		Total/Branch					8.50	0.04	8.46
	Total/Date						8.50	0.04	8.46
Total							8.50	0.04	8.46