



Number OF Transactions: 1
Beneficiary Name: LASENDO LIMITED
Beneficiary IBAN: CY05002001950000357034960009
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 023765
Date/Time: 2022/01/19 03:51
Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2022/01/18	79C, Stavrou Avenue, Strovolos	07:15	6824774	645555	SuperAdmin	admin	5.40	0.02	5.38
		Total/Branch					5.40	0.02	5.38
	Total/Date						5.40	0.02	5.38
Total							5.40	0.02	5.38