



Number OF Transactions: 3
Beneficiary Name: ZSP HEALTHCARE LTD
Beneficiary IBAN: CY64005002510002510166430901
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 334241
Date/Time: 2022/02/10 03:27
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Amount	Fee	Net Amount
2022/02/09	50, Petrou Tsirou	09:24	7205597	29597022428	5.00	0.02	4.98
		11:04	7207437	2959941445	10.50	0.03	10.47
		11:09	7207506	2959981940	2.00	0.01	1.99
		Total/Branch			17.50	0.06	17.44
	Total/Date				17.50	0.06	17.44
Total					17.50	0.06	17.44