



Number OF Transactions: 1
Beneficiary Name: ZSP HEALTHCARE LTD
Beneficiary IBAN: CY64005002510002510166430901
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 310872
Date/Time: 2022/02/11 03:38
Beneficiary Bank Name: HELLENIC BANK PUBLIC COMPANY LTD

Date	Branch	Time	TranID	Order ID	Amount	Fee	Net Amount
2022/02/10	50, Petrou Tsirou	12:25	7224951	29617612521	1.60	0.01	1.59
		Total/Branch			1.60	0.01	1.59
	Total/Date				1.60	0.01	1.59
Total					1.60	0.01	1.59