



Number OF Transactions: 2
Beneficiary Name: FARMAKEIO B SMYLANAKI LTD
Beneficiary IBAN: CY64008005010000000002227984
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 316699
Date/Time: 2022/02/15 04:06
Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Order ID	Amount	Fee	Net Amount
2022/02/12	2, Thasou st. Konia 8300	12:10	7259852	812961	14.15	0.04	14.11
		Total/Branch			14.15	0.04	14.11
	Total/Date				14.15	0.04	14.11
2022/02/14	2, Thasou st. Konia 8300	08:40	7284293	813271403	6.45	0.02	6.43
		Total/Branch			6.45	0.02	6.43
	Total/Date				6.45	0.02	6.43
Total					20.60	0.06	20.54