



Number OF Transactions: 1
Beneficiary Name: QUALITAS MEDCARE LTD
Beneficiary IBAN: CY84002001950000357029792173
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 705779
Date/Time: 2021/04/21 03:29
Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/04/20	77 Arch. Makariou Av., Latsia	13:31	3007200	358744	SuperAdmin	mikel	2.20	0.01	2.19
		Total/Branch					2.20	0.01	2.19
	Total/Date						2.20	0.01	2.19
Total							2.20	0.01	2.19