



Number OF Transactions: 1
Beneficiary Name: QUALITAS MEDCARE LTD
Beneficiary IBAN: CY84002001950000357029792173
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 024218
Date/Time: 2021/06/03 03:25
Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/06/02	77 Arch. Makariou Av., Latsia	07:15	3660694	976827	SuperAdmin	mikel	7.00	0.04	6.96
		Total/Branch					7.00	0.04	6.96
	Total/Date						7.00	0.04	6.96
Total							7.00	0.04	6.96