



Number OF Transactions: 3
Beneficiary Name: FARMAKEFTIKI ORGANOSI KYPROU LIMITED
Beneficiary IBAN: CY13008001600000000000006919
Payment Mode: Bank Transfer
Commission Value: 15.00
Reference Number: SO - 045623
Date/Time: 2021/06/16 03:15
Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Amount	Commission	Net Amount
2021/06/15	MY MALL LIMASSOL	13:13	3834132	39.50	5.93	33.57
		Total/Branch		39.50	5.93	33.57
	NICOSIA MALL	16:32	3835998	35.00	5.25	29.75
		18:57	3837470	21.00	3.15	17.85
		Total/Branch		56.00	8.40	47.60
	Total/Date			95.50	14.33	81.17
Total				95.50	14.33	81.17