



Number OF Transactions: 2
Beneficiary Name: QUALITAS MEDCARE LTD
Beneficiary IBAN: CY84002001950000357029792173
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 740825
Date/Time: 2021/06/18 03:40
Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/06/17	77 Arch. Makariou Av., Latsia	13:55	3862446	389992	SuperAdmin	mikel	2.20	0.01	2.19
		17:51	3864855	285454	SuperAdmin	mikel	2.80	0.01	2.79
		Total/Branch					5.00	0.02	4.98
	Total/Date						5.00	0.02	4.98
Total							5.00	0.02	4.98