



Number OF Transactions: 3
Beneficiary Name: FARMAKEFTIKI ORGANOSI KYPROU LIMITED
Beneficiary IBAN: CY13008001600000000000006919
Payment Mode: Bank Transfer
Commission Value: 15.00
Reference Number: SO - 740825
Date/Time: 2021/06/18 03:40
Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Amount	Commission	Net Amount
2021/06/17	KINGS AVENUE MALL PAPHOS	11:33	3860422	35.00	5.25	29.75
		11:35	3860441	18.50	2.78	15.72
		Total/Branch		53.50	8.03	45.47
	LEOFOROS LIMASSOL	18:28	3865303	21.38	3.21	18.17
		Total/Branch		21.38	3.21	18.17
	Total/Date			74.88	11.24	63.64
Total				74.88	11.24	63.64