



Number OF Transactions: 2
Beneficiary Name: QUALITAS MEDCARE LTD
Beneficiary IBAN: CY84002001950000357029792173
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 944735
Date/Time: 2021/06/23 03:52
Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/06/20	77 Arch. Makariou Av., Latsia	13:43	3897110	947254	SuperAdmin	mikel	17.80	0.09	17.71
		Total/Branch					17.80	0.09	17.71
	Total/Date						17.80	0.09	17.71
2021/06/21	77 Arch. Makariou Av., Latsia	14:25	3905464	838636	SuperAdmin	mikel	2.70	0.01	2.69
		Total/Branch					2.70	0.01	2.69
	Total/Date						2.70	0.01	2.69
Total							20.50	0.10	20.40