



Number OF Transactions: 1
 Beneficiary Name: QUALITAS MEDCARE LTD
 Beneficiary IBAN: CY84002001950000357029792173
 Payment Mode: Bank Transfer
 Commission Value: 0.00
 Reference Number: SO - 523564
 Date/Time: 2021/07/23 03:57
 Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/07/22	77 Arch. Makariou Av., Latsia	09:46	4299524	365389	SuperAdmin	mikel	2.60	0.01	2.59
		Total/Branch					2.60	0.01	2.59
	Total/Date						2.60	0.01	2.59
Total							2.60	0.01	2.59