



Number OF Transactions: 3
Beneficiary Name: FARMAKEFTIKI ORGANOSI KYPROU LIMITED
Beneficiary IBAN: CY13008001600000000000006919
Payment Mode: Bank Transfer
Commission Value: 15.00
Reference Number: SO - 638039
Date/Time: 2021/07/29 03:49
Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Amount	Commission	Fee	Net Amount
2021/07/28	LEOFOROS LIMASSOL	12:11	4368662	21.00	3.15	0.06	17.79
		Total/Branch		21.00	3.15	0.06	17.79
	NICOSIA MALL	14:50	4370690	25.00	3.75	0.07	21.18
		18:32	4372673	19.50	2.92	0.06	16.52
		Total/Branch		44.50	6.67	0.13	37.70
	Total/Date			65.50	9.82	0.19	55.49
Total				65.50	9.82	0.19	55.49