



Number OF Transactions: 1
Beneficiary Name: QUALITAS MEDCARE LTD
Beneficiary IBAN: CY84002001950000357029792173
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 750231
Date/Time: 2021/08/11 04:01
Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/08/10	77 Arch. Makariou Av., Latsia	16:29	4540460	786455	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