



Number OF Transactions: 1
 Beneficiary Name: QUALITAS MEDCARE LTD
 Beneficiary IBAN: CY84002001950000357029792173
 Payment Mode: Bank Transfer
 Commission Value: 0.00
 Reference Number: SO - 800239
 Date/Time: 2021/08/19 03:51
 Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/08/18	77 Arch. Makariou Av., Latsia	13:09	4631003	876897	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							2.70	0.01	2.69