



Number OF Transactions: 3
 Beneficiary Name: QUALITAS MEDCARE LTD
 Beneficiary IBAN: CY84002001950000357029792173
 Payment Mode: Bank Transfer
 Commission Value: 0.00
 Reference Number: SO - 500862
 Date/Time: 2021/08/24 03:08
 Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/08/20	77 Arch. Makariou Av., Latsia	16:33	4656160	463397	SuperAdmin	mikel	10.00	0.05	9.95
		Total/Branch					10.00	0.05	9.95
		Total/Date					10.00	0.05	9.95
2021/08/22	77 Arch. Makariou Av., Latsia	15:22	4674411	873897	SuperAdmin	mikel	12.40	0.06	12.34
		19:15	4676121	535874	SuperAdmin	mikel	8.60	0.04	8.56
		Total/Branch					21.00	0.10	20.90
		Total/Date					21.00	0.10	20.90
Total							31.00	0.15	30.85