



Number OF Transactions: 1
 Beneficiary Name: QUALITAS MEDCARE LTD
 Beneficiary IBAN: CY84002001950000357029792173
 Payment Mode: Bank Transfer
 Commission Value: 0.00
 Reference Number: SO - 542571
 Date/Time: 2021/08/27 03:28
 Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/08/26	77 Arch. Makariou Av., Latsia	11:10	4720758	579534	SuperAdmin	mikel	6.20	0.03	6.17
		Total/Branch					6.20	0.03	6.17
	Total/Date						6.20	0.03	6.17
Total							6.20	0.03	6.17