



Number OF Transactions: 1
 Beneficiary Name: QUALITAS MEDCARE LTD
 Beneficiary IBAN: CY84002001950000357029792173
 Payment Mode: Bank Transfer
 Commission Value: 0.00
 Reference Number: SO - 801824
 Date/Time: 2021/09/03 04:00
 Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/09/02	77 Arch. Makariou Av., Latsia	09:10	4812070	249875	SuperAdmin	mikel	4.00	0.02	3.98
		Total/Branch					4.00	0.02	3.98
	Total/Date						4.00	0.02	3.98
Total							4.00	0.02	3.98