



Number OF Transactions: 1
Beneficiary Name: QUALITAS MEDCARE LTD
Beneficiary IBAN: CY84002001950000357029792173
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 810860
Date/Time: 2021/09/08 03:30
Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/09/07	77 Arch. Makariou Av., Latsia	09:03	4877403	575626	SuperAdmin	mikel	14.40	0.07	14.33
		Total/Branch					14.40	0.07	14.33
	Total/Date						14.40	0.07	14.33
Total							14.40	0.07	14.33