



Number OF Transactions: 1
 Beneficiary Name: FARMAKEFTIKI ORGANOSI KYPROU LIMITED
 Beneficiary IBAN: CY130080016000000000000006919
 Payment Mode: Bank Transfer
 Commission Value: 15.00
 Reference Number: SO - 700091
 Date/Time: 2021/09/16 03:10
 Beneficiary Bank Name: AstroBank Limited

Date	Branch	Time	TranID	Amount	Commission	Fee	Net Amount
2021/09/15	NICOSIA MALL	10:48	4978569	42.49	6.37	0.13	35.99
		Total/Branch		42.49	6.37	0.13	35.99
	Total/Date			42.49	6.37	0.13	35.99
Total				42.49	6.37	0.13	35.99