



Number OF Transactions: 2
Beneficiary Name: Limassol Municipality
Beneficiary IBAN: CY72008002010000000000059575
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number:
Beneficiary Bank Name: AstroBank Limited

Date	Time	TranID	Bill Number	Sender Name	Sender Phone	Amount	Net Amount
2021/10/21	22:48	5458815	43834533 8	Angeliki Sawa	35799247 172	43.50	43.50
	22:51	5458821	44108640 9	Angeliki Sawa	35799247 172	174.00	174.00
Total						217.50	217.50