



Number OF Transactions: 1
Beneficiary Name: QUALITAS MEDCARE LTD
Beneficiary IBAN: CY84002001950000357029792173
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 830892
Date/Time: 2021/10/28 03:43
Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/10/27	77 Arch. Makariou Av., Latsia	14:40	5531593	657866	SuperAdmin	mikel	7.40	0.04	7.36
		Total/Branch					7.40	0.04	7.36
	Total/Date						7.40	0.04	7.36
Total							7.40	0.04	7.36