



Number OF Transactions: 3
Beneficiary Name: QUALITAS MEDCARE LTD
Beneficiary IBAN: CY84002001950000357029792173
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 304227
Date/Time: 2021/11/03 03:05
Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/11/02	77 Arch. Makariou Av., Latsia	09:09	5622251	688334	SuperAdmin	mikel	2.03	0.01	2.02
		09:42	5622580	387938	SuperAdmin	mikel	1.32	0.01	1.31
		13:36	5625945	666594	SuperAdmin	mikel	2.80	0.01	2.79
		Total/Branch					6.15	0.03	6.12
	Total/Date						6.15	0.03	6.12
Total							6.15	0.03	6.12