



Number OF Transactions: 2
Beneficiary Name: QUALITAS MEDCARE LTD
Beneficiary IBAN: CY84002001950000357029792173
Payment Mode: Bank Transfer
Commission Value: 0.00
Reference Number: SO - 959723
Date/Time: 2021/11/05 03:28
Beneficiary Bank Name: BANK OF CYPRUS PUBLIC COMPANY LIMITED

Date	Branch	Time	TranID	Order ID	Merchant User Type	Merchant User	Amount	Fee	Net Amount
2021/11/04	77 Arch. Makariou Av., Latsia	20:55	5661924	492593	SuperAdmin	mikel	0.60	0.01	0.59
		20:57	5661942	533863	SuperAdmin	mikel	2.90	0.01	2.89
		Total/Branch					3.50	0.02	3.48
	Total/Date						3.50	0.02	3.48
Total							3.50	0.02	3.48