

REMITTANCE ADVICE

Viamed
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Cross Hills
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Glos Hospitals NHS Foundation Trust
Gloucestershire Shared Services
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Glos Hospitals NHS Foundation Trust

DATE:	07/03/2017	PAYMENT REFERENCE:	3157232	VENDOR:	VIAMED01
Invoice/Credit Note Number	Date	Voucher Number	Net Amount		
IN149214	07/02/2017	581178	204.00		
				TOTALS	204.00

Paid by BACS **A/C** 00906662 **S/C** 20-78-42

The payment will be credited to your Bank Account within 4 working days