

REMITTANCE ADVICE

FINANCE DEPARTMENT
TRUST HEADQUARTERS
MARLBOROUGH STREET
PO BOX 3214 BRISTOL
BS1 9JR

VIAMED
15 STATION ROAD
CROSS HILL
KEIGHLEY
WEST YORKSHIRE
BD20 7DT

Supplier Number:	V0028
Bank Account:	00906662
Sort-Code:	20-78-42
Date:	03-JAN-17
Page no:	1
Batch no:	14024
Supplier Name	
VIAMED	

INVOICE DATE	INVOICE/CREDIT NO	OUR REF	INVOICE DESCRIPTION	AMOUNT £
18/11/16	IN147846	1395603		205.20
Payment made by BACS				TOTAL PAYMENT
				205.20

Payment will be made into the above account within ten working days from 03-JAN-17,
please contact the Finance Department if not received.

Contact details in case of query: Creditor Payments
0117 342 3683 or
0117 342 3689