

Account: VIAMED LIMITED

Remittance Advice

VIAMED LIMITED
15 STATION ROAD
CROSS HILLS
KEIGHLEY
WEST YORKSHIRE
BD20 7DT

DETAILS

Page No: 1

Date: 18-JAN-17

Supplier Code: 100437

DATE	TRANSACTION	YOUR REFERENCE	OUR REFERENCE	PAYMENT AMOUNT
03/10/16	INVCE	IN146991	LR629200	357.60
10/10/16	INVCE	IN147097	LR629316	176.40
10/10/16	INVCE	IN147110	LR629464	210.00
10/10/16	INVCE	IN147113	LG569043	357.60
10/10/16	INVCE	IN147121	LR629468	174.00
24/10/16	INVCE	IN147373	LR629157	255.00
26/10/16	INVCE	IN147417	LG569344	258.60
28/10/16	INVCE	IN147461	LR630307	4488.00
11/11/16	CREDIT	CRE03844	INV IN147461	222.00
Payment will be in your account within 5 working days			TOTAL	6055.20