

# REMITTANCE ADVICE



Viamed  
15 Station Road  
Cross Hills  
Keighley  
West Yorkshire  
BD20 7DT

**Care UK Health Care**  
Accounts Payable  
PO Box 680  
Northwich  
CW9 9PG

Supplier Number: 14198  
Payment Date: 06/09/2017  
Contact Phone: 0333 321 1959  
E-mail: HealthCare\_Accounts.Payable@careuk.com

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Invoice Date	Your Invoice No.	Our Reference	Amount	On Behalf Of
26/07/2017	IN151994	141210116	524.40	Care UK Clinical Services Ltd

**Total £**

524.40

This amount will be transferred into Bank Account: \*\*\*\*6662

Sort Code: 207842

**To ensure that your invoices are paid promptly, please note the following:**

- \* All invoices and statements to be sent to the PO Box address noted above.
- \* All invoices must quote a Care UK Cost Centre reference number or official Purchase Order number.
- \* Care UK have the right to reject any invoice which does not quote a valid Cost Centre or PO number.