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Separate Remittance Advice: paper document number - 750562

1 message

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To: REMITS@viamed.co.uk

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Remittance Advice**LIVERPOOL WOMENS NHS FOUNDATION TRUST**

LIVERPOOL WOMENS HOSPITAL, CROWN STREET, LIVERPOOL, L8 7SS. Tel - 0151 7089988 Fax - 0151 7024028

VIAMED LTD **Supplier Number:** 1975

15 STATION ROAD **Date:** 01-Sep-17

CROSS HILLS **Bank Sort Code:** 207842

Bank Account Number: ****6662

KEIGHLEY **Bank Name:** BARCLAYS BANK PLC

BD20 7DT

Invoice Number Invoice Date Voucher Number Invoice Amount Discount Amount Payable

IN152160 04-Aug-17 5078004 171.00 0.00 171.00

IN152189 07-Aug-17 5078115 73.44 0.00 73.44

Method of Payment: BACS TOTAL 244.44

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