University Hospitals of Leicester NHS
NHS Trust

Accounts Payable Department
PO BOX 189
Leicester Royal Infirmary
LE1 5WP
Tel: 01162585133 Fax: 01162586663
Email: AccountsPayable@uhl-tr.nhs.uk
NHS Code: RWE

Account: VIAMED LIMITED

Remittance Advice

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

DETAILS

Page No: 1

Date: 18-OCT-17

Supplier Code: 100437

DATE	TRANSACTION	YOUR REFERENCE	OUR REFERENCE	PAYMENT AMOUNT
03/05/17	INVCE	IN150598	LR635202	372.00
04/05/17	INVCE	IN150605	LR637312	86.40
05/05/17	INVCE	IN150636	LR637413	357.60
15/05/17	INVCE	IN150770	LR637621	830.40
22/05/17	INVCE	IN150888	LG572658	253.20
23/05/17	INVCE	IN150901	LR638072	918.00
30/05/17	INVCE	IN151004	LG572827	357.60
Payment will be in your account within 5 working days			**TOTAL**	**3175.20**