

Outward Payment Instruction (Faster Payments & CHAPs)



Store

One Southampton Row

1. Customer details

Customer Name

Brighton Bed Centre Ltd Executive

Account Number

1 7 9 7 1 2 2 8

2. Payment details

Payment Type

- ☒ Faster Payment (No Fee) *Faster Payment Maximum Value = £100K. Payments of a higher value must be sent via CHAPs*
- ☐ CHAPs (£17.50 Fee) *CHAPs Cut Off Time = 3PM. Payments received after this time will be processed Next Day*
- ☐ Account To Account Transfer

Amount (GBP)

1 1 7 4 0 2 0

Date To Process

0 5 0 4 2 0 1 6

Amount in Words

Eleven thousand, seven hundred and forty pounds and twenty pence

3. Beneficiary Information

Beneficiary Name

MRS MARGARET MORRIS

Beneficiary Sort Code

0 9 0 1 2 8

Beneficiary Account Number

2 6 4 6 7 7 5 0

Payment Reference (if applicable)

SSAS PENSION

4. Customer Signature

Authorised Signature

Margaret Morris

Date:

5-4-2016

Authorised Signature

D. M. Morris

Date:

05 APRIL 2016

FOR INTERNAL USE ONLY - ID & V Confirmed



Customer Photo



Customer Signature



4Treas



ID

(Passport or Driving Licence Number)

Input By:

Signature:

Date:

Authorised By:

Signature:

Date:

301 OF 1.1 (05/12/11)