## **Outward Payment Instruction**

(Faster Payments & CHAPs)



V.A.M.	Registered Scheme Administrator									
1. Customer details										
Customer Name	Brighton Bed Centre Ltd Executive Pension Schem	e Account Number	0	4	9	1	9	0	8	8
2. Payment details										
	Payment (No Fee) s (£25.00 Fee) nt To Account Transfer	Date To Process	• 0	4	0	4	2	0	1	9
3. Beneficiary Information										
Beneficiary Name Brighton Bed Centre Ltd   Beneficiary Sort Code 0 9 0 1 2 8   Beneficiary Account Number 0 3 3 9 6 0 7 7   Payment Reference (if applicable) Loan										
4. Customer Signature										
Authorised S Mari	Authorised Signa	ture								
Date: 0/2 - 0/2 - 2019 Date:										
FOR INTERNAL USE ONLY										