

Outward Payment Instruction (Faster Payment & CHAPs)

1. CUSTOMER DETAILS	
Customer/ Business Name CHL INVESTMENTS SSAS	
Debit Account Number 45488535	
2. PAYMENT DETAILS	
Payment Type (All payments over the faster payments limit will be	
Faster Payment (Personal, no fee. Business, tariff dependent) Payment Date	CHAPs (Personal £25.00. Business tariff dependent)
Twenty Nine Thousand Seven Hui	ndred Eleven Pounds and Sixty One Pence
3. EXISTING BENEFICIARY	
Beneficiary Name	
Metro Bank Beneficiary Ref. BEN	
4. NEW BENEFICIARY V	
Beneficiary Name Claire Hamlett-Ledger	
Account Type Personal Account Business Account	
Beneficiary Sort Code 60-83-71	Beneficiary Account Number 4 1627190
Payment Reference (if applicable) PCLS Claire	
Payment Reference	
Confirmation of Payee Outcome Understood (internal use only) Match Close Match No Match Not Checked	
5. CUSTOMER SIGNATURE	
Primary Applicant	Secondary Applicant
I Am helt-leady	Georgina Marin
Claire Hamlett Ladger	Name CCODOINIA BAADTINI
Claire Hamlett-Ledger	GEORGINA MARTIN
Date 09/05/2024	Date 09/05/2024
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Outward Payment Instruction (Faster Payment & CHAPs) (continued)

We may need to call to confirm the validity of the payment you would like us to call.	instruction. Please detail below the authorised signatories from the bank mandat
Full Name	
Full Name	
Please note if the account is two to sign we will need to spe	eak with two of the authorised signatories.
FOR INTERNAL USE ONLY	
	If applicable:
ID&V confirmed (refer to ID&V Matrix)	HVT completed and attached
Request fully input to T24	Payment authorised or refered to CPU
Signature varies however I have verified the customer via system held photo	
inputter Signature	Manager Signature
lawa a	
lame	Name
Data	
Date	Date