

## **Outward Payment Instruction** (Faster Payment & CHAPs)

1. CUSTOMER DETAILS	
Customer/ Business Name  Gehane Habib Pension Fun	d .
Debit Account Number 39736519	
2. PAYMENT DETAILS	
Payment Type (All payments over the faster payments limit will be sent as a	
Faster Payment (Personal, no fee. Business, tariff dependent)	CHAPs (Personal £25.00. Business tariff dependent)
Payment Date	n e e e e e e e e e e e e e e e e e e e
Amount £ 1900	
Amount in Words One Thousand Nine Hundred F	Pounds only
3. EXISTING BENEFICIARY	
Beneficiary	
Name	
Metro Bank Beneficiary Ref.	
4. NEW BENEFICIARY	
Retirement Capital Inc	
Beneficiary 2 3 - 1 4 - 7 0	Beneficiary Account Number 8 3 7 3 7 3 1 2 7
Payment Reference (if applicable) Takeover & Annual Admir	
(if applicable)	
5. CUSTOMER SIGNATURE	
Primary Applicant	Secondary Applicant
Gehane Habit	georgina Martin
Name .	Name
Gehane Habib	Georgina Martin
Date 30/05/2022	Date 30/05/2022

OPEN 7 DAYS

Monday - Friday: 8am - 8pm • Saturday: 8am - 6pm • Sunday: 11am - 5pm

Local Call Centre: 0345 08 08 500 • metrobankonline.co.uk • MetroBank\_Help



## Outward Payment Instruction (Faster Payment & CHAPs) (continued)

/e may need to call to confirm the validity of the pay	syment instruction. Please detail below the authorised signatories from the bank mandate you would like us
ull Name	1 . 4
ull Name (Schono 149)	bu
ull Name	
Please note if the account is two to sign we will need	d to speak 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
Inputter Signature	Manager Signature
	w
4	Name
Name	
Name	

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