

Outward Payment Instruction (Faster Payment & CHAPs)
1. CUSTOMER DETAILS

Customer/
Business Name **Goldman Pension SSAS**

Debit Account
Number **46601718**

2. PAYMENT DETAILS

Payment Type (All payments over the faster payments limit will be sent as a CHAPs)

☐ Faster Payment (Personal, no fee, Business, tariff dependent)

☐ CHAPs (Personal £25.00, Business tariff dependent)

Payment Date **13.07.2023**

Amount **£190,000.00**

Amount in Words **One hundred and ninety thousand pounds**

3. EXISTING BENEFICIARY

Beneficiary
Name

Metro Bank
Beneficiary Ref

B E N

4. NEW BENEFICIARY

Beneficiary
Name **Beaufort Montague Harris**

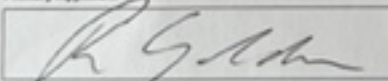
Beneficiary
Sort Code **55 - 70 - 31**

Beneficiary Account Number **796660789**

Payment Reference
(if applicable) **Goldman**

5. CUSTOMER SIGNATURE

Primary Applicant



Name

RACHEL GOLDMAN

Date

13-07-23

Secondary Applicant

Name

Date

OPEN 7 DAYS

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

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