

## **International Payment Instruction**

ore One Southa	impton Row		
1. CUSTOME	ER DETAILS		
Customer name	Hydon and grim Limited Pension Scheme		
Customer number	Account number 1 7 5 2 4 9 3 3		
2. PAYMENT DETAILS			
Date to be actioned	13/04/2017 Amount in figures 40,0000 Currency (to be sent in) GBP		
Amount in words	Forty Thousand Pounds Only		
3. BENEFIC	ARY DETAILS		
Beneficiary Name	MAPLESFS LIMITED		
Beneficiary Address	250 Park Avenue, 7th Floor, New York, NY 10177, USA		
Beneficiary Account Number or IBAN*	803-3830-956		
Payment Reference	*IBAN is required for ALL Euro payments  Carlton James Commercial Real Estate Ltd Account # 714134		
4. BENEFICIARY BANK DETAILS			
Beneficiary Bank Name	BANK OF NEW YORK MELLON		
Beneficiary Bank Address	ONE WALL STREET, NEW YORK, NY10286		
Beneficiary Bank SWIFT Code or ABA Routing Number	IRVTUS3NXXX		
5. INTERME	EDIARY BANK DETAILS - (Sometimes required if funds sent to small Financial Institution)		
Intermediary Bank Name	BANK OF NEW YORK MELLON		
Intermediary Bank Address	LONDON, ENGLAND		
Intermediary Bank SWIFT Code or ABA Routing Number	I R V T G B 2 X X X X		



## **International Payment Instruction**

(continued)

6. CHARGES			
I/We pay Metro Bank charges only Beneficiary to pay all charges     We pay all charges			
I/We would like the charges debited from a separate account. Please charge the following account:			
7. CUSTOMER SIGNATURE			
Please note: All international payment in currencies other than GBP/EUR/USD are at indicative rates on the day and are therefore subject to change accordingly.			
Primary Applicant:	Secondary Applicant:		
40 10 10 .	Date 13 APRIL 2017		
Date 13/04/2017	Date 13 APRIL 2017		
FOR INTERNAL USE ONLY			
ID&V confirmed (refer to ID&V Matrix)	If applicable:  HVT completed and attached Payment authorised or refered to CPU		
Staff Signature			
	Manager Signature		
Name	N		
Date	Name		
	Date		
Date received	Exchange Rate		
Time received	GBP Equivalent		
	Charges		