

Outward Payment Instruction (Faster Payment & CHAPs)

1. CUSTOMER DETAILS

Customer/
Business Name **INFOMATRIX - PTC AMERICANOS**

Debit Account
Number **45187399**

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 **04.09.24**

Amount **£ 1127**

Amount in
Words **One thousand one hundred and twenty seven pounds**

3. EXISTING BENEFICIARY ☐

Beneficiary
Name

Metro Bank
Beneficiary Ref.

B E N

4. NEW BENEFICIARY ☐

Beneficiary
Name **Mr C Americanos**

Account Type ☒ Personal Account ☐ Business Account

Beneficiary
Sort Code **07 - 01 - 16**

Beneficiary Account Number **40616164**

Payment Reference
(if applicable) **EXP - Trustee Expenses**

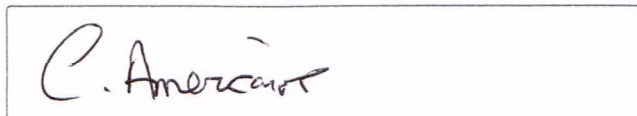
Payment Reference

Confirmation of Payee
Outcome Understood
(internal use only)

☐ Match ☐ Close Match ☐ No Match ☐ Not Checked

5. CUSTOMER SIGNATURE

Primary Applicant

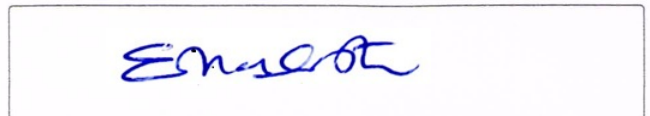


Name

CHARLES G. AMERICANOS

Date **3/9/2024**

Secondary Applicant



Name

Emily McAlister

Date **04.09.24**