Outward Payment Instruction

(Faster Payments & CHAPs)



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Store One S	Southampton Row	and the second								
1. Customer	delails									
Customer JOHN	GARVEY PENSION	Account Number	1	5	7	9	7	8	1	9
2. Payment d	etails		No. 4000							
Payment Type										
refleres	No Fee) Faster Payment Meximum Value							3		APs
Account To Accou	ee) CHAPs Cut Off Time = 3PM. Payment int Transfer	s received after ti	tis tim	e will	be pro	VC/03/5	ed Ne	XT Day	1	
Amount (GBP)	2 0 0 0 0 0 0	Date To Process	1	6	0	6	2	O	1	7
Anount in TW	ENTY THOUSAND POUN	JDS	***************************************	\$0,00000000000000000000000000000000000		1	***************************************			
3. Seneficiary			errorio (notabadonicida es	***********	********************		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		***************************************	
eneficiary Name	SAPPHIRE FINANCIAL	SOLUTION	ue		*************	*****************	\ -		***************************************	
eneficiary Sort Code	4 0 4 2 1 2	SOLUTIO	NO.	naddilli () () ee cadaad	***************************************	order (d. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			***************************************	
eneficiary Account lumber	2 2 2 1 6 5 5	8								
Payment Reference f applicable)	PREFERENCE SHARES	<u>*************************************</u>	***************************************	***************************************	**************	***********	***************************************		\	
4. Customer S	ignature				(0000000000000000000000000000000000000	TO PERSONAL PROPERTY.	***************************************	CONTRACTOR OF THE STATE OF THE		and the second
uthorised Signature		Authorised Signal	ure		***************************************	*****************				
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late: 16/06/	201	Date:	6/	6	120))	7		STATE OF THE STATE	
and a second	and the state of t				***************************************				***************************************	
Customer	NLY - ID & V Confirmed Customer 4Tress	Passo	ort or C	riving	Licenc	ce Nu	nber)	*******	********	***********
Fhoto	Signature L	***********	***************************************	*****	A STATE STATE STATE STATE STATE AND ADDRESS OF THE STATE STATE AND ADDRESS OF THE STATE STATE AND ADDRESS OF THE STATE S	**************************************	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		************	
Input By: Signature:		Authorised By Signature:	*	and a second second	HARITAN KANAMATAN	STORESTON AND STREET	therican since the con-		Seedladgesseeres	
Date:		Date:	***************************************		W					***************************************
						A CONTRACTOR OF THE CONTRACTOR	20	OF	.1 (05/	(2/44)

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