

AIB BANK PLC
Sort Code: 23-83-96

Outward Payment Instruction for Faster Payments

1. SCHEME DETAILS

Scheme Name

Account Number

2. PAYMENT DETAILS

Date to be actioned

Amount
(GBP)

£

Amount in
Words

3. BENEFICIARY

Beneficiary
Name

Beneficiary
Sort Code

 - -

Beneficiary Account Number

Payment Reference

4. PURPOSE OF TRANSACTION - Description

Upfront payment of fees to be refunded to the scheme by the borrower (MYA Clinics Ltd) as part of the loan.

We authorise the scheme administrator to make the payment on the date stated on this form in accordance with the following authorised account signatures.

5. TRUSTEE SIGNATURE

1st Signatory

Name

John Michael Ryan

Date

2nd Signatory - if applicable

Name

Date