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 3. BENEFICIARY Beneficiary Beneficiary Beneficiary Account Number Sort Code Payment Reference 4. PURPOSE OF TRANSACTION - Description Upfront payment of fees to be refunded to the scheme by the borrower (Mills Medical Services Limited) 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	2nd Signatory - if applicable
Name	Name
John Michael Ryan	
Date	Date