

Outward Payment Instruction (Faster Payment & CHAPs)

1. CUSTOMER DETAILS

Customer/
Business Name **Jual Edmonds Pension Scheme**

Debit Account
Number

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

Amount **£ 1,041.63**

Amount in
Words **One Thousand & Forty One Pounds sixty three Pence**

3. EXISTING BENEFICIARY ☐

Beneficiary
Name

Metro Bank
Beneficiary Ref. **B E N**

4. NEW BENEFICIARY ☐

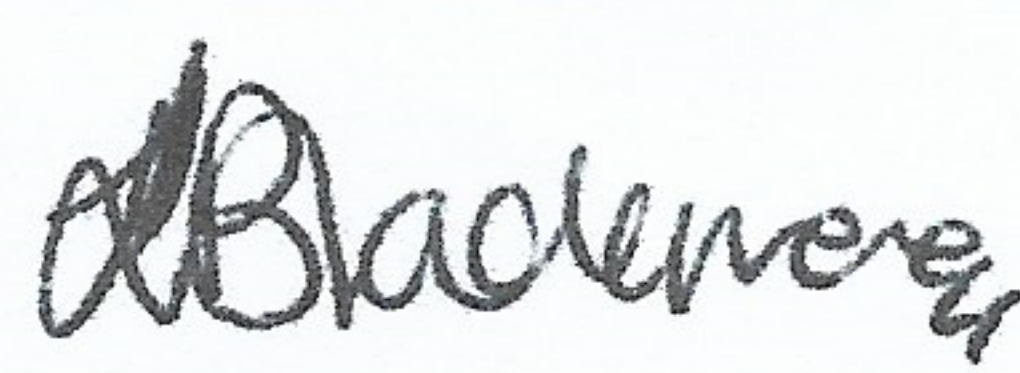
Beneficiary
Name **J.K. Pietruszka**

Beneficiary
Sort Code **20 - 84 - 61** Beneficiary Account Number **53759164**

Payment Reference
(if applicable) **INV 564**

5. CUSTOMER SIGNATURE

Primary Applicant



Name **Lisa Blackmore**

Date **08/03/2023**

Secondary Applicant

Name

Date

OPEN 7 DAYS

Monday - Friday: 8am - 8pm • Saturday: 8am - 6pm • Sunday: 11am - 5pm
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