

## **Outward Payment Instruction** (Faster Payment & CHAPs)

1. CUSTOMER DETAILS		
Customer/ Business Name	MASON FAMILY PENSION SCHEME	
Debit Account Number	45551717	May record for the control of the co
2. PAYMENT DETAILS		
Payment Type (All payments over the faster payments limit will be sent as a CHAPs)		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ent (Personal, no fee. Business, tariff dependent)	CHAPs (Personal £25.00. Business tariff dependent)
Payment Date		OCIN CHTYP JOYCKETS ROYM AND DERIVAME, CO. DROXCOGNITOR
Amount £	5,500.00	
Amount in Words Five thousand five hundred pounds		
3. EXISTING BENEFICIARY		
Beneficiary		
Name Company		
Metro Bank Beneficiary Ref. B E N		
A NEW DENEETOLADY		
4. NEW BENEFICIARY		
Beneficiary Name P Mason & Mrs CM Mason		
Beneficiary Sort Code	20-73-48	Beneficiary Account Number 70626090
Payment Reference (if applicable)  Reimbursement of IFA fee		
5. CUSTOMER SIGNATURE		
Primary Applicant		Secondary Applicant
1. M	azon	Georgina Martin
Name Name		
Cathryn Mason		Georgina Martin
Date 29/06/2023 Date 29/06/2023		Date 29/06/2023

OPEN 7 DAYS

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

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