

Invoice

Billing Address:

Company

Party At Peets Exec Pension

Name

Matthew & Ivor Peet Trustees

Address

C/o

Pension Practitioner

Venture Wales Building Wales

Postcode

CF48 4DR

Invoice Number:

06/03/19

Invoice Date:

Client	Fee Description	Amount Each	Total Amount
Party at Peets	TRUSTEE/ADMINISTRATOR SUPPORT 2015-2016		£2,178.00
	TRUSTEE LOAN ADMINISTRATION 2015-2016		£850.00
	TRUSTEE ACCOUNT ASSISTANCE & PREPERATION 15/16		£750.00
	TRUSTEE MEETING 2015-2016		£400.00
	TRUSTEE/ADMINISTRATOR SUPPORT 2016-2017		£2,178.00
	TRUSTEE LOAN ADMINISTRATION 2016-2017		£850.00
	TRUSTEE ACCOUNT ASSISTANCE & PREPERATION 16/17		£750.00
	TRUSTEE MEETING 2016-2017		£400.00
	TRUSTEE/ADMINISTRATOR SUPPORT 2017-2018		£2,178.00
	TRUSTEE LOAN ADMINISTRATION 2017-2018		£850.00
	TRUSTEE ACCOUNT ASSISTANCE & PREPERATION 17/18		£750.00
	TRUSTEE MEETING 2017-2018		£400.00
	TRUSTEE/ADMINISTRATOR SUPPORT 2018-2019		£2,178.00
	TRUSTEE LOAN ADMINISTRATION 2018-2019		£850.00
	TRUSTEE ACCOUNT ASSISTANCE & PREPERATION 18/19		£750.00
	TRUSTEE MEETING 2018-2019		£400.00
		Subtotal:	£16,712.00
		:	
		Expenses:	
		Grand Total:	£16,712.00

Payment is required within 14 days of receipt of Invoice, a prepaid envelope is enclosed for your convenience.

Notes:

Bank Details:

Stratford Collins Consultants Lloyds TSB, 18 Wyndham Street, Bridgend, CF31 1EQ Account Number; 00422204 Sort Code;30-91-18

Stratford Collins Consultants Limited, PO BOX 83, Llantwit Major, Vale Of Glamorgan, CF71 9BT Registered in England and Wales No. 5951675 Tel; 01446 500538 E-Mail; adrian@stratfordcollins.co.uk

AIB BANK					
Sort Code:		Payment Ir	nstruction for Faster Payments		
1. SCHEME	DETAILS				
Scheme Name	Party At Peets Executive Pensi	on			
Account Number	04919088				
2. PAYMEN	T DETAILS				
Date to be actioned Amount	06/03/2019				
Amount in	teen thousand Seven Hundred	and Twelve p	pounds		
3. BENEFIC	CIARY				
Beneficiary Name Beneficiary Sort Code	Stratford Collins 5 2 - 3 0 - 0 3	Beneficiary Ac	count Number 1 3 2 5 4 1 0 3		
Payment Reference	PartyatPeets				
4. PURPOS	E OF TRANSACTION - Description				
Scheme F	ees Payment				
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. TRUSTE	E SIGNATURE				
1st Signatory	1st Signatory 2nd Signatory - if applicable Add Add Add Add Add Add Add Add Add Ad				
Matthew Pe	Matthew Peet		Name Ivor Richard Peet		
	Date 06/03/2019		Date 06/03/2019		