## Outward Payment Instruction

(Faster Payments & CHAPs)



Store	One So	outhampton Row				
1. Cu	istomer de	staits				
Customer Name	Boyd &	Lloyd Pension Schen	ne Account Number	2 3 0 5	0 5 5 2	
2. Payment details						
CHAI	er Payment (No	Fee) Faster Payment Maximum V  CHAPs Cut Off Time = 3PM. Payet Transfer				
Amount (GI	BP)	,500.0	O Date To Process	2 1 0 7	2 0 1 7	
Amount in Words Five hundred pounds						
3. Beneficiary Information						
Beneficiary Name		Bristol City Council				
Beneficiary Sort Code 5 6 0 0 5						
Beneficiary Account Number		4 1 3 2 2 2	6 6			
Payment Reference (if applicable)		Invoice ref: 8004401007				
4. Customer Signature						
Authorised Signature			Authorised Signal	Authorised Signature		
Robert Ray			50	Emach		
Date: 17.8.2017 Date: 17/6				08/17		
FOR INTE	RNAL USE O	NLY-ID & V Confirmed	(Passp	ort or Driving Licence N	umber)	
Customer Photo Customer Signature 4Tress ID						
Input By:			Authorised By			
Signature: Signature:						
Date			Date:			

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