## **Outward Payment Instruction**

(Faster Payments & CHAPs)



Store	One Southampton Row	

1. Customer de	tails			
Customer Name SCTL PENSION SCHEME		Account Number 17968289		
2 Payment deta	ails			
CHAPs (£17.50 Fee)  Account To Account  Amount (GBP)	Transfer 5 0 0 0 0 0	= £100K. Payments of a higher value must be sent via CHAPs ts received after this time will be processed Next Day  Date To Process 2 8 0 2 2 0 1 7		
Words Five Hundred Pounds				
3. Beneficiary Information				
Beneficiary Name Pension Practitioner .Com				
Beneficiary Sort Code	2 0 4 5 4 5			
Beneficiary Account Number	2 3 7 8 4 6 0	6		
Payment Reference (if applicable)				
4. Customer Si	gnature			
Authorised Signature		Authorised Signature		
B.m. G	ence			
Date: 28 February 2017				
FOR INTERNAL USE OF Customer Photo	NLY - ID & V Confirmed  Customer Signature  4Tress	(Passport or Driving Licence Number)		
Input By:		Authorised By:		
Signature:		Signature:		
Date: D D	M M Y Y Y Y	Date: D D M M Y Y Y Y		

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