

Outward Payment Instruction

(Faster Payments & CHAPs)



Allied Irish Bank (GB)

V.A.M. Registered Scheme Administrator

1. Customer details

Customer Name **TCA SSAS**

Account Number **0 4 9 1 9 0 8 8**

2. Payment details

Payment Type

- ☒ Faster Payment (No Fee)
☐ CHAPs (£25.00 Fee)
☐ Account To Account Transfer

Amount (GBP) **3 9 6 9 3 7 5**

Date To Process **1 2 0 8 2 0 1 9**

Amount in Words **Thirty nine thousand six hundred and ninety three pounds and seventy five pence**

3. Beneficiary Information

Beneficiary Name **R.M.Emerson**

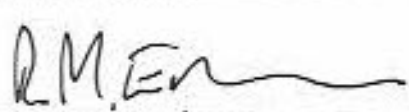
Beneficiary Sort Code **0 9 0 1 2 9**

Beneficiary Account Number **3 5 5 5 9 7 2 4**

Payment Reference (if applicable) **Full PCLS - R Emerson**

4. Customer Signature

Authorised Signature


Date: **12/8/19**

Authorised Signature

Date:

FOR INTERNAL USE ONLY



Input By:

Signature:

Date:

Authorised By:

Signature:

Date:
