

Outward Payment Instruction (Faster Payment & CHAPs)

Customer/ Business Name	TGS Retirement Scheme	
Debit Account Number	46672011	
2. PAYMEN	T DETAILS	
Payment Type (Al	I payments over the faster payments limit will be sent a	as a CHAPs)
√ Faster Paym	ent (Personal, no fee. Business, tariff dependent)	CHAPs (Personal £25.00. Business tariff dependent)
Payment Date		
Amount £	1,425.43	
Amount in	ne Thousand Four Hundred & 7	Twenty Five Pounds forty three pence only
Words		
3. EXISTING	G BENEFICIARY [
Beneficiary	<u></u>	
Name		
Name		
Metro Bank	BEN	
Metro Bank	BEN	
Metro Bank Beneficiary Ref.	BEN CONTRACTOR OF THE PROPERTY	
Metro Bank Beneficiary Ref. 4. NEW BE	NEFICIARY [
Metro Bank Beneficiary Ref. 4. NEW BEI Beneficiary Name	NEFICIARY J.K.Pietruszka	
Metro Bank Beneficiary Ref. 4. NEW BE Beneficiary Name Beneficiary	NEFICIARY [Beneficiary Account Number 5 3 7 5 9 1 6 4
Metro Bank Beneficiary Ref. 4. NEW BE Beneficiary Name Beneficiary Sort Code Payment Reference	NEFICIARY J.K.Pietruszka 2 0 - 8 4 - 6 1	Beneficiary Account Number 5 3 7 5 9 1 6 4
Metro Bank Beneficiary Ref. 4. NEW BE Beneficiary Name Beneficiary Sort Code Payment Reference	NEFICIARY J.K.Pietruszka 2 0 - 8 4 - 6 1	Beneficiary Account Number 5 3 7 5 9 1 6 4
Metro Bank Beneficiary Ref. 4. NEW BE Beneficiary Name Beneficiary Sort Code Payment Reference (if applicable)	NEFICIARY J.K.Pietruszka 2 0 - 8 4 - 6 1	Beneficiary Account Number 5 3 7 5 9 1 6 4
Metro Bank Beneficiary Ref. 4. NEW BE Beneficiary Name Beneficiary Sort Code Payment Reference (if applicable)	NEFICIARY D. J.K.Pietruszka 2 0 - 8 4 - 6 1 * INV 585 MER SIGNATURE	Beneficiary Account Number 5 3 7 5 9 1 6 4 Secondary Applicant
Metro Bank Beneficiary Ref. 4. NEW BE Beneficiary Name Beneficiary Sort Code Payment Reference (if applicable)	NEFICIARY D. J.K.Pietruszka 2 0 - 8 4 - 6 1 * INV 585 MER SIGNATURE	Secondary Applicant
Metro Bank Beneficiary Ref. 4. NEW BE Beneficiary Name Beneficiary Sort Code Payment Reference (if applicable)	NEFICIARY D. J.K.Pietruszka 2 0 - 8 4 - 6 1 * INV 585 MER SIGNATURE	
Metro Bank Beneficiary Ref. 4. NEW BE Beneficiary Name Beneficiary Sort Code Payment Reference (if applicable) 5. CUSTO Primary Applic Name	J.K.Pietruszka 2 0 - 8 4 - 6 1 * INV 585 MER SIGNATURE ant	Secondary Applicant
Metro Bank Beneficiary Ref. 4. NEW BE Beneficiary Name Beneficiary Sort Code Payment Reference (if applicable) 5. CUSTO Primary Applic Name	NEFICIARY D. J.K.Pietruszka 2 0 - 8 4 - 6 1 * INV 585 MER SIGNATURE	Secondary Applicant Georgina Markin

OPEN 7 DAYS

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

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