

## **Outward Payment Instruction** (Faster Payment & CHAPs)

1. CUSTOMER DETAILS
Customer/ Business Name  TELEVIDEO SSAS
Debit Account Number 53644341
2. PAYMENT DETAILS
Payment Type (All payments over the faster payments limit will be sent as a CHAPs)  ✓ Faster Payment (Personal, no fee. Business, tariff dependent)  CHAPs (Personal £25.00. Business tariff dependent)
Payment Date
Amount £ 569,000.00
Amount in Words Five Hundred and Sixty Nine Thousand Pounds.
3. EXISTING BENEFICIARY
Beneficiary Name  Metro Bank BEN  BEN
Beneficiary Ref.
4. NEW BENEFICIARY V
Beneficiary Name  True Potential Investments
Beneficiary Sort Code 15-10-00 Beneficiary Account Number 29457568
Payment Reference (if applicable) TP1385870
5. CUSTOMER SIGNATURE
Primary Applicant Secondary Applicant
Jakeir Georgina Mastin
Name Name
Paul Scivill VIVIEN SCIVILL Georgina Martin
Date 28/05/2024 Date 18/06/2024



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

Local Call Centre: 0345 08 08 500 • metrobankonline.co.uk • 9 MetroBank\_Help





## Outward Payment Instruction (Faster Payment & CHAPs) (continued)

We may need to call to confirm the validity of the payment instrute to call.	ction. Please detail below the authorised signatories from the bank mandate you would like u
Full Name	
Full Name	
Please note if the account is two to sign we will need to speak w	ith two of the authorised signatories.
FOR INTERNAL USE ONLY	
	If applicable:
ID&V confirmed (refer to ID&V Matrix)	HVT completed and attached
Request fully input to T24	Payment authorised or refered to CPU
Inputter Signature	Manager Signature
Nossa	News
Name	Name