

**Outward Payment Instruction**

(Faster Payments &amp; CHAPs)

**Allied Irish Bank (GB)**

V.A.M.

Registered Scheme Administrator

**1. Customer details**

Customer Name

The Tierney Family Trust

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)

2 0 0 0 0 0 0 0

Date To Process

8/1/2021 M M Y Y Y Y

Amount in Words

Twenty thousand pounds

**3. Beneficiary Information**

Beneficiary Name

Mrs S C Tierney

Beneficiary Sort Code

4 0 5 1 6 2

Beneficiary Account Number

5 2 0 7 2 0 0 1

Payment Reference (if applicable)

Mrs S C Tierney

**4. Customer Signature**

Authorised Signature

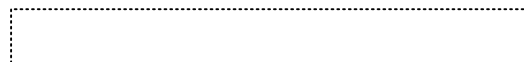
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Date: 8/1/2021

Authorised Signature

Date:

**FOR INTERNAL USE ONLY**

Input By:

Signature:

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