

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

1. CUSTOMER DETAILS
Customer/ Business Name Whitemore SSAS Retirement Scheme
Debit Account 45906740
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 16.01.24
Amount £ 1860.00
Amount in Words One thousand eight hundred and sixty pounds
3. EXISTING BENEFICIARY
Beneficiary
Name
Metro Bank Beneficiary Ref. B E N
4. NEW BENEFICIARY
Beneficiary Name  WEB Scaffolding
Account Type Personal Account  Business Account
Beneficiary Sort Code 6 0 - 2 1 - 4 7 Beneficiary Account Number 9 4 8 6 1 2 6 9
Payment Reference (if applicable) Inv. 2291
Payment Reference
Confirmation of Payee Outcome Understood (internal use only)  Match  Close Match  No Match  Not Checked
5. CUSTOMER SIGNATURE
Primary Applicant Secondary Applicant
ADJ
Name Name
A.R. WHITEMORE Emily McAlister
Date 16 /01 /2024 Date 17.01.24