DocuSign Envelope	D: A4FA4AE6-7A	FD-470B-A6EE-	96B890183EEC

Outward Pay	AFD-470B-A6EE-96B890183EEC ment Instruction										
(Faster Payments & CHAPs) Allied Irish Bank (GB)											
V.A.M. Register	Registered Scheme Administrator										
1. Customer de	tails										
Customer Name Enterpt	Account Number 0 4 9 1 9 0 8 8										
2. Payment details											
Payment Type Faster Payment (No CHAPs (£25.00 Fe											
Account To Account	Transfer										
Amount (GBP)	5 0 0 0 0 0 0 0 0 1 2 0 2 2										
Amount in Words	thousand pounds										
3. Beneficiary I	nformation										
Beneficiary Name	Redmayne Bentley										
Beneficiary Sort Code	3 0 0 0 5										
Beneficiary Account Number	0 2 9 3 3 9 9 7										
Payment Reference (if applicable)	HFD2229B										
4. Customer Sig	anature										
Authorised Signature	Authorised Signature										
DocuSigned by: John Alair EBD6891FFF8040D Date: 5/1/2022	Date:										
FOR INTERNAL USE ON											

Input By:	put By:					Authorised By:												
Signature:									Signature:									
Date:	D	D	Μ	Μ	Y	Y	Y	Y	Date:	D	D	M	M	Y	Y	Y	Y	