Outward Payment Instruction

(Faster Payments & CHAPs)



V.A.M.	Cranford															
1. Customer details																
Customer Name	Istrat Li	nited	SSA	S Pens	sion S	Schem		count imber	0	4	6	9	0	0	7	7
2. Pa	2. Payment details															
Payment Type ✓ Faster Payment (No Fee) CHAPs (£25.00 Fee) Account To Account Transfer																
Amount (GE	1	0	0 3	0 0	0 0	Date T	o Proces	s 2	0	0	6	2	0	1	9	
Amount in Words Ten thousand and thirty pounds																
3. Beneficiary Information																
Beneficiary Name		AJBSL CM1 Account														
Beneficiary Sort Code		1	2 2	2 7	3	4										
Beneficiary Account Number		0	6 (0 0	0	1 3	3									
Payment R (if applicab	EP396043WHBV															
4. Customer Signature																
Authorised Signature							Authorised Signature									
DocuSigned by: 7F349CEAA49F4C1																
Date: 6/27/2019							Date:									
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Input By:							Auth	orised B	By:							
Signature	:						Sign	ature:								
Date:							Date	Date: D D M M Y						Υ	Υ	Υ