

Outward Payment Instruction (Faster Payment & CHAPs)

1. CUSTOMER DETAILS

Customer/
Business Name **Networks 2 Business**

Debit Account
Number **46218248**

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 **07.08.2024**

Amount **£ 748.36**

Amount in
Words **Seven hundred forty eight pounds and thirty six pence**

3. EXISTING BENEFICIARY ☐

Beneficiary
Name

Metro Bank
Beneficiary Ref.

B E N

4. NEW BENEFICIARY ☐

Beneficiary
Name **David Kenneth Skilling**

Account Type ☒ Personal Account ☐ Business Account

Beneficiary
Sort Code **07 - 04 - 36**

Beneficiary Account Number **24902446**

Payment Reference
(if applicable) **Net Pension**

Payment Reference

Confirmation of Payee
Outcome Understood
(internal use only)

☐ Match

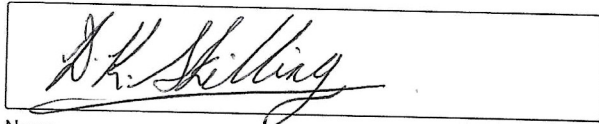
☐ Close Match

☐ No Match

☐ Not Checked

5. CUSTOMER SIGNATURE

Primary Applicant

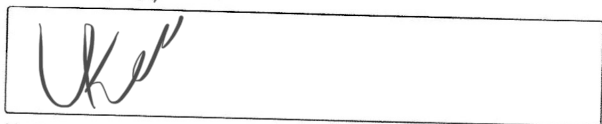


Name

David Skilling

Date **07.08.2024**

Secondary Applicant



Name

Veronica Walkman

Date **07.08.2024**

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Payment Date **07.08.2024**

Amount **£ 251.64**

Amount in
Words **Two hundred fifty one pound and sixty four pence**

3. EXISTING BENEFICIARY ☐

Beneficiary
Name

Metro Bank
Beneficiary Ref.

B E N

4. NEW BENEFICIARY ☐

Beneficiary
Name

Registered Scheme Administrator Limited

Account Type

☐ Personal Account

☒ Business Account

Beneficiary
Sort Code

2 3 - 0 8 - 0 1

Beneficiary Account Number

2 7 8 5 6 5 3 6

Payment Reference
(if applicable)

PAYE 2505 David S

Payment Reference

Confirmation of Payee
Outcome Understood
(internal use only)

☐ Match

☐ Close Match

☐ No Match

☐ Not Checked

5. CUSTOMER SIGNATURE

Primary Applicant

David Skilling

Name

David Skilling

Date **07.08.2024**

Secondary Applicant

Veronica Walkman

Name

Veronica Walkman

Date **07.08.2024**