Outward Payment Instruction

(Faster Payments & CHAPs)



V.A.M. Registered Scheme Administrator 1. Customer details Customer Account Oakleaf Facilities Limited SIBA 0 4 9 1 9 0 8 8 Name Number 2. Payment details Payment Type Faster Payment (No Fee) CHAPs (£25.00 Fee) Account To Account Transfer Date To Process 7 5 2 0 2 2 0 7 3 3 2 9 Amount (GBP) 4 0 1 Amount in Four hundred and seventeen thousand three hundred and three pounds and twenty nine pence Words 3. Beneficiary Information Beneficiary Name Oakleaf Facilities Limited SIBA Beneficiary Sort Code 2 3 5 0 8 0 **Beneficiary Account** 4 5 4 7 1 6 1 4 Number Payment Reference AIB closure (if applicable) 4. Customer Signature Authorised Signature Authorised Signature

FOR INTERNAL USE ONLY																	
		[
Input By:									Authorised By:								
Signature:									Signature:								
Date:	D	D	M	M	Υ	Υ	Υ	Υ	Date:	D	D	M	M	Υ	Υ	Υ	Υ

DocuSigned by:

Mark Rowthorn

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