Outward Payment Instruction

(Faster Payments & CHAPs)



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Store (One S	outha	mpton	Ro)W												
1. Cust	omer d	etails															
Customer Name	PMA F	ensic	n Fun	d					Account Number	1	9	4	5	6	8	2	7
2. Payn	nent de	ails															
CHAPs () CHAP							OK. Paymen								APs
Amount (GBP)	,	2 8	9 5	0	0.	0	0	Dat	te To Proces	3	1	0	8	2	0	1	6
Amount in Words	Two	Hund	dred 8	Eig	hty	Nir	ne T	hou	sand Fiv	/e Ηι	ındı	red	pou	nds	only	/	
3. Bene	ficiary	nforma	ition														
Beneficiary Na	ame	Lloy	d _. Reev	es L	td												
Beneficiary Sc	ort Code	2 3	3 0	5	8	0											
Beneficiary Ac Number	count	1 9	9 4	3	4	2	0	6									
Payment Refe (if applicable)	rence	PMA	PS							***							
4. Custo	omer Si	gnature															
Authorised Sign	nature							Autho	orised Signa	ture	************					000000000000	
iRe	سرو	2)						В	. A.1	2	2	· 	2	_			
Date: 31/08/	/2016	***************************************	SSSS ASSA ASSA ASSA ASSA ASSA ASSA ASS		nomina de miscorios	NOTIFICATION AND AND AND AND AND AND AND AND AND AN	NAME OF THE OWNER, OF THE OWNER, OF THE OWNER, OF THE OWNER, OWNER, OWNER, OWNER, OWNER, OWNER, OWNER, OWNER,	Date	31 AC	164	57	-2	0/1	3	anno ano andresa	Arteriorentensche passenun	

OR INTERNAL USE ONLY - ID & V Confirmed	(Passport or Driving Licence Number)
Customer Photo Customer Signature	ress ID
nput By:	Authorised By:
Signature	Signature:
Date:	Date: