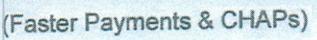
## Outward Payment Instruction





Store	One Southampton Row																			
	domes de																			
Customer Name	SMC LIMITED SSAS									Account Number	-	2	0	3	7	6	3	3	3	
CHAP	Payment (No	CHA	Ps Cu							100K. Paymen										
Amount (GB	P)		7	7	8	3.	2	5		Date To Proces	35	2	4	0	5	2	0	1	7	
Amount in Seven thousand seven hundred and eighty three pounds and twenty five pence																				
																gan ancien receptan				
Beneficiary	SIV	SM Services - Stuart Megson																		
Beneficiary Sort Code		3	0	9	7	5	1													
Beneficiary Account Number		4	0	2	3	1	8	6	5	8						(24000) 4000 1000	•			
Payment F (if applicat	SIV	SMC Motorcycles Sheffield																		
Authorised Signature									1	Authorised Signature										
Date: 24/65/14								B-M-P233 Date: 25 MAT 20(7)												
***************************************	ERNAL USE C		ID & V		irmed				Г		sspo	nt or	Drivi	ng Lic	cence	Numb	er)		••••••••	
	ustomer hoto		Signat		L		Tress		-	ID	*****	· · · · · · · ·	******	******	********		******			
Input By:								Authorised By:												
Sgrature:								Signature:												

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