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	-	ents & CHAPs) Allied Irish Bank (GB)									
V.A.M.	Registered Scheme Administrator										
1. Cı	ustomer de	tails									
Customer Name	Whitec	Account Number0491908									
2. Pa	ayment det	ails									
	er Payment (No Ps (£25.00 Fee unt To Account	e) Transfer									
Amount (GE	BP)	6 5 5 0 Date To Process 2 8 0 1 2 0 2 2									
Amount in Words	Six h	undred and fifty five pounds an fifty pence									
3. Be	eneficiary I	nformation									
Beneficiary	y Name	Trace Design and Build									
Beneficiary	y Sort Code	0 9 0 1 2 9									
Beneficiary Number	y Account	2 8 1 6 0 1 2 0									
Payment R (if applicat		353									
4. Cu	ıstomer Sig	gnature									
Authorised	Signature	Authorised Signature									
(M	00000000000000000000000000000000000000	Sarlyenic Date:									
	RNAL USE ON										

Input By:									Authorised By:								
Signature:									Signature:								
Date:	D	D	$\left \right\rangle \right $	\mathbb{N}	Y	Y	Y	Y	Date:	D	D	M	\mathbb{N}	Y	Y	Y	Y