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Signature:

Date:

-	ment Instruction ents & CHAPs)	ו		Allie	ed Iris	sh Ba	ank	(GF	3)
V.A.M. Registe	red Scheme Admini	strator							
1. Customer de	etails								
Customer Name Whitec	cliff Pension Scher	me	Account Number	0 4	9 1	9	0	8	8
2. Payment det	tails								
Payment Type Faster Payment (N CHAPs (£25.00 Fe Account To Account	ee)								
Amount (GBP)	2,382	9 1	Date To Process	2 5	0	2	Ũ	2	2
Amount in Words	thousand three hur	ndred and o	eighty two	pounds	and n	inety	one	pen	се
3. Beneficiary I	Information								
Beneficiary Name	Drax Energy Sol	lutions Lin	nited						
Beneficiary Sort Code	2 0 0 0 0	0							
Beneficiary Account Number	6 3 5 2 1	5 7	5						
Payment Reference (if applicable)	In 1105544378								
4. Customer Si	gnature								
Authorised Signature		A	uthorised Signat	ture					
DocuSigned by: E8D24E691238482 Date: 27/1/2022									
Date: 2771/2022			ate:						
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