

DATA PROTECTION NOTICE

Please ensure you read the Data Protection Notice. Details of this payment, including the identity of both the sender and receiver(s), may be disclosed to authorities in connection with combating terrorism and other serious crime.

Please sign in accordance with mandate

Print Name:

Customer
Authorised
Signature:

Date Day Month Year

Print Name:

For bank use only

BANK Information only

(Must tick OC/OP, missing information can lead to delays)

Please tick: Original in Post (OP) OR Original at Counter (OC) Sig Verified ID Verified

Insert ID Type and Number/Signature Verification Reference Number:

Payment confirmed with (if present): Customer Name

Time

Comments:

Signed off by Staff Member (Print Name)

Staff Number

Date

Day Month Year

Signature