



**Bank of St.Helena**

www.sainthelenabank.com

# PAYMENT INSTRUCTION - GBP (UK BENEFICIARIES ONLY)

*NB: This form can only be used to make payments in Sterling (GBP)*

**PLEASE MAKE THE FOLLOWING PAYMENT BY:**

**Cheque**

(shaded fields indicate mandatory information)

(Complete beneficiary address field)

**3 day value**

**1 day value**

**AMOUNT:** £

**BENEFICIARY:**

**ADDRESS:**

**NAME OF BANK:**

**ADDRESS OF BANK:**  
(mandatory for payments outside UK)

**SORT CODE:** - -

(Mandatory field for UK payments)

**BENEFICIARY A/C NUMBER:**

**INFORMATION FOR BENEFICIARY:**

**NAME OF REMITTER:**

**CUSTOMER NAME:**  
**BANK OF ST HELENA ACCOUNT NUMBER:**

**AUTHORISED SIGNATURE(S)**  
1)  
2)  
**DATE:**

**AMOUNT OF REMITTANCE** £  
**PLUS CHARGES** £  
**TOTAL DEBIT** £

**BANK USE ONLY**  
BSH REF  
LLOYDS REF  
INPUT BY  
AUT'ISED BY