**Foreign Faster/Manual Payment Request Form**

Account Number: **10009388**

Account Name: **HUMBER NHS FOUNDATION TRUST**

Date of Payment:

Receiving Bank/ Account Details:

Bank Identification Code (BIC): International Bank Account Number (IBAN):

|  |  |  |
| --- | --- | --- |
|  |  |  |

Account Name: Bank Name:

|  |  |  |
| --- | --- | --- |
|  |  |  |

Bank Address:

Amount in Figures:

Amount in Words:

Reason for Payment:

Distribution/

Financial Codes:

Date:

Name (in Capitals):

Signed: