HER MAJESTY'S COURTS SERVICE hmcs

Court Funds Office

Request for Payment to Payee's Bank

Please complete this form in BLOCK CAPITALS.

In the _____Court

Full account title:

To the Accountant General, Court Funds Office, 22 Kingsway, London, WC2B 6LE.

I/We request you to pay to the bank below

☐ Interest or periodical payments to me/us under an Order

dated _____ 20_____

The evidence of life (CFO 206) is attached
(delete if it is not)

OR

☐ The sum of £ payable to me/us

Under an Order dated _____ 20_____

Account name:

Name of bank:

Bank address:

Account Number: **Sort Code:**

Signed:

(as)

Name of firm:

Address:

(Solicitor for the)

Solicitor's reference **Dated**_____ **20**_____

- If payable to several persons jointly, all must sign, unless they are executors when only one need sign, adding the word 'executor'
- If payable to a firm, a partner must sign adding the words 'a partner in the firm of'
- If payable to a bank in its own right, the manager of that bank must sign
- If payable to a company, the company secretary must sign adding 'secretary of….'

For CFO use only

Date input: DD MM YY

Sched-Reg: -

Account Number:

Date Cheque Paid: DD MM YY

Signature _____

Signature _____

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