

Part 2: Payment Details

Please transfer my funds to my/our AIB payment account

BIC Code A I B K I E 2 D

IBAN Number

Name of Account Holder

IMPORTANT: Please ensure that your Maturity instructions are accurate and complete. If your Maturity instructions are inaccurate or incomplete, or the funds in your Account fall below the required minimum balance, or there is a conflict in your Maturity instructions, we may open up an AIB Demand Deposit account for you and transfer the balance of your Account to the new account.

Signature(s)	
Day Month Year	Day Month Year
Date	Date
Day Month Year	Day Month Year
Date	Date

Allied Irish Banks, p.l.c. is regulated by the Central Bank of Ireland.

For Bank Use Only

I confirm that the maturity instructions above have been fully completed by the customer and the amendment updated on the system

Acknowledged by: Staff Signature	
Please confirm the Customer signature has been verified and how	Branch Brand and Date