

**Tutor Pay Claim Form**

**Name: Michael Williams** To: ProE et al Ltd

28 Old Brompton Road  
 London   
 SW7 3SS

**Address: 3/2 10 Watson Street , Glasgow, G15AF**

**Date: 22/7/23**

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| LECTURE HOURS DELIVERED | 31/8/23 – Whole day (6 Hours) |
| AGREED FEE PER HOUR | Day – 250 |
| **TOTAL PAY** |  |
| ACCOUNT HOLDER NAME:  BANK SORT CODE:  BANK ACCOUNT NUMBER: | Michael Williams de la Bastida  04-00-04  02032084 |
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