STANDARD FORM OF REQUEST

This form has been approved by Banking & Payments Federation Ireland and The Consultative Committee of Accountancy Bodies - Ireland (CCAB-I).

NameByrne O'Byrne & Co	(Auditor)							
Address222/224, Harold's Cross Road, Dublin 6W	Date05/08/2025							
	Our Ref							
Customer/Client NameFinancial Planning Matters Limited								
Address10 Glencairn Heights, The Gallops, Leopardstown, Dublin 18								
Account number/Holding branch _University Branch Montrose								
I/ We have read this document and I/We authorise you to provide the information requested herein in respect of the accounts of the above-name customer and also to disclose the number of joint accounts, if any, to which the above-named customer is party.								
Please send this information to our auditor(s),								
Yours faithfully,								
Authorised Signature(s)								
Dear Sir,								

We report that at the close of business on 28/02/2025, the records of this branch showed:

1. Bank Accounts

Description of a/cs	S/SX	Date of last letter	Balance	Dr./Cr.	Amounts accrued but date (N	ote B)
(including deposit a/cs)	Note A	outlining terms/conditions of borrowing			Estimated Interest	Estim. Current
					Dr/Cr	Account Fees &
		oonowing .				other charges
84421725						
65374468						

Note A: Where a specific letter of set-off for principal exists affecting any of the above accounts, please indicate this by adding 'S' to the account title. If the set-off refers to accounts other than those being reported on use 'SX'. (Other set-off may arise either at law or on foot of a bank security document).

Note B: The provision of this information may entail work and cost. If the information is not essential this request should be deleted.									
2.	FU	FULL TITLES AND DATES OF CLOSURE OF ALL ACCOUNTS CLOSED DURING PERIOD:							
	3.	Amount only							
-	4.	CONTINGENT LIABILITIES							
All known contingent liabilities									
(a)) Tot	cal of Bills discounted for your customer, with recourse	Dates(s)	Amount					
		nounts and dates of each Guarantee, (excluding Acceptances) or Indemnity given to you by the customer.							
(c.) Amounts and dates of each Guarantee, (excluding Acceptances) Bond or Indemnity given by you on behalf of your customer.									
,	(d) Total of Bills drawn on and accepted by Bank on behalf of customers (excluding (f) hereunder)								
(e) Total Forward Foreign Contracts									
(f)	Tot	al of Outstanding Liabilities under Documentary Credits							
(g) Otł	ners – Please give details							
		formation available at branch contained herein is given in confidence ty as Auditor(s) and without responsibility on the part of the Bank o							

...... Date