**Authorisation for the Sussex Police Treasurer to**





**deduct charitable donations from pay**

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| **Name**: ……………………………………Tick as appropriate  | xx x  **New Recruit Transferee Serving Officer** |
| **Warrant Number**: ………... **SAP No.** …….………….. | **Date joined Sussex Police**: ………………………. |

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| **Care of Police Survivors**In the event of death in service COPS provides help for the families of officers who have lost their lives. | I authorise the Treasurer to deduct the sum of **30p** monthly from my pay in respect of the Care Of Police Survivors ( COPS ) Charitable Trust.Please tick in the box if you wish to contribute |
| **Police Childrens Fund (Gurney)**In the event of medical retirement or death in service, the Police Childrens Fund provides help for children for educational expenses. | I authorise the Treasurer to deduct the sum of **87p** monthly from my pay in respect of the Police Childrens Fund.Please tick in the box if you wish to contribute |
| **Police Care UK**Assistance with general living expenses given to officer and/or spouse, following injury on duty, ill-health retirement or Death in service.  | I authorise the Treasurer to deduct the sum of **5p** monthly from my pay in respect of the Police Care UK.Please tick in the box if you wish to contribute |
| **Police Rehabilitation Centre, Flint House****Goring-on-Thames** Provides rest and recuperation following injury or illness.  | Date of previous Police Officer Service (if applicable)…………………………………………………………………………I authorise the Treasurer to deduct the sum of **£9.21** monthly from my pay in respect of Flint House. Please tick in the box if you wish to contribute |
|  |
| OFFICER SIGNATURE:  | PRINT NAME:  |
|  |
| WARRANT NO: | DATE: / /  |