**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 | |
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| OFFICER SIGNATURE: | | PRINT NAME: |
|  | | |
| WARRANT NO: | | DATE: / / |