**HASSRA PERMISSION FOR SPEND ON A DEBIT CARD**

|  |  |
| --- | --- |
| **Cardholder’s Name** |  |
| **Debit Card Number**  |  |
| **Reason for Spend** |  |
| **Amount** | £ |
| **Item on which spend is to be made** |  |

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Give permission for the spend detailed above and confirm this is for HASSRA business.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HASSRA POSITION (e.g committee member) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date ­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_