**Member Groups Authorised Signatories**

|  |  |  |
| --- | --- | --- |
| **For** |  | **Branch/Group** |

In accordance with BCS rules, the following officers of the Specialist Group/Branch may authorise invoices and expense claims to be paid by BCs Swindon from the Group/Branch budget.

**NB** – If officers **DO NOT CHANGE**, the Treasurer must submit an email to the Community Groups Team informing of **NO CHANGES**.

WE MUST HOLD EVIDENCE OF APPROVED SIGNATORIES.

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| --- | --- | --- |
| Treasurer: | Print Name: |  |
|  | Specimen Signature: |  |
|  | Email Address: |  |
|  |
| Chairman: | Print Name: |  |
|  | Specimen Signature: |  |
|  | Email Address: |  |
|  |
| Secretary: | Print Name: |  |
|  | Specimen Signature: |  |
|  | Email Address: |  |

|  |  |
| --- | --- |
| **Signed (Treasurer):** |  |
| **Print Name:** |  | **Date:** |  |

**Please return completed form to the Community Groups Team on** **groups@bcs.uk**