

PLASTICA LTD
STAFF PURCHASE FORM

Section 1 - To be completed by Employee

Name: _____ **Department:** _____

Items: _____

Cost: _____

Discount: _____
(if applicable)

Total: _____

Tick Your Chosen Method of Payment:

✓
Cash ☐
Card ☐

I authorise the amount (plus VAT) to be deducted from my next salary payment

If paying by Cash or Card please contact Finance to finalise payment

Signed: _____ **Date:** _____

Section 2 - To be completed by a Director:

Staff Purchase Agreed By: _____

Date: _____

Section 3 - To be completed by Customer Services:

The order is only to be processed if it has been signed in
Section 2 by an authorised signatory.

Order Input By: _____

Date: _____

**Please send a copy of this form to the Finance Department
after approval and processing**