

SHERWOOD FOREST HOSPITALS CHARITY DATA PROTECTION AND PRIVACY POLICY

		POLICY	
Reference	IG/014		
Approving Body	Charitable Funds Committee		
Date Approved	20 October 2026		
For publication to external SFH website	Positive confirmation received from the approving body that the content does not risk the safety of patients or the public:		
	YES	NO	N/A
	x		
Issue Date	20 October 2026		
Version	3		
Summary of Changes from Previous Version	Comprehensive review to update legal and regulatory references; clarify controller responsibilities, lawful bases, direct-marketing requirements, and individual rights; strengthen processor, international-transfer, retention, breach, DPIA, accountability, photography, and AI controls; and update governance, training, monitoring and related document references.		
Supersedes	2		
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Date of Environmental Impact Assessment (if applicable)	n/a.		
Legal and/or Accreditation Implications	Potential non-compliance with UK GDPR/Data Protection Act 2018.		
Target Audience	Charity staff, Trust staff working on behalf of the Charity, Volunteers, Trustees and committee members. Contractors, Agency Workers, Third party processors, Donors and supporters, Event participants, Beneficiaries, Website Users		
Review Date	October 2028		
Sponsor (Position)	Director of Corporate Affairs		
Author (Position & Name)	Community Involvement Manager		
Lead Division/ Directorate	Corporate		
Lead Specialty/ Service/ Department	Community Involvement Department		

Position of Person able to provide Further Guidance/Information	Head of Data Security and Privacy and Data Protection Officer	
Associated Documents/ Information	Date Associated Documents/ Information was reviewed	
n/a		
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APPENDICIES

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1.0 INTRODUCTION

This policy explains how Sherwood Forest Hospitals Charity collects, uses, shares, stores and protects personal information about donors, supporters, volunteers, event participants, beneficiaries, website users, and other individuals who engage with the Charity. It is intended to provide clear and accessible information about our processing activities and should be read alongside the Trust's wider Information Governance policies and related documents in section 10.

The Charity processes personal information in accordance with the UK General Data Protection Regulation (UK GDPR), the Data Protection Act 2018, the Privacy and Electronic Communications Regulations 2003 (PECR), the Data (Use and Access) Act 2025 and other applicable charity, fundraising, financial and regulatory requirements. The Charity is registered with the Fundraising Regulator.

2.0 POLICY STATEMENT

The Charity is committed to processing personal information lawfully, fairly, transparently, and securely.

This policy establishes the Charity's principles, mandatory controls, accountability arrangements, and expected outcomes. Detailed operational steps, forms, decision records, approval routes, and staff instructions are maintained in the relevant supporting procedures and guidance.

3.0 DEFINITIONS/ ABBREVIATIONS

3.1 Sherwood Forest Hospitals Charity is an NHS charity, registered charity number 1054086, that manages the charitable funds of Sherwood Forest Hospitals NHS Foundation Trust. The Charity is the data controller, and its registered office is King's Mill Hospital, Mansfield Road, Sutton-in-Ashfield, Nottinghamshire, NG17 4JL.

3.2 The Charitable Funds Committee is the forum within the Trust charged to consider, direct, and resolve issues arising from charitable donations to or activities with the Trust, from the range of associated donor organisations.

3.3 UK General Data Protection Regulation (UK GDPR): the principal data protection framework applying in the United Kingdom, supplemented by the Data Protection Act 2018 and amended by subsequent legislation. It sets out principles, lawful bases, individual rights, and accountability requirements for processing personal information.

3.4 Personal information means information relating to an identified or identifiable living individual.

3.5 Processing means any operation performed on personal information, including collecting, recording, organising, storing, using, sharing, altering, retrieving, restricting, deleting, or destroying it.

3.6 A processor is an organisation that processes personal information on behalf of a controller.

3.7 Direct marketing includes communications directed to particular individuals that promote the Charity's aims, activities, or fundraising.

4.0 ROLES AND RESPONSIBILITIES

All individuals within scope must comply with this policy, complete required training, use only approved systems and suppliers, protect personal information, respect recorded communication preferences, report suspected incidents promptly and seek advice where a proposed activity may create privacy or information-security risk. Managers must ensure that appropriate local controls, records, and oversight are in place.

5.0 APPROVAL

Approval and review of this policy will be undertaken by the Charitable Funds Committee, with advice from the Data Protection Officer and Data Security and Privacy Team. The policy will be reviewed at least every two years, or sooner following a material change in law, regulatory guidance, processing activity, systems, suppliers, or risk.

6.0 DOCUMENT REQUIREMENTS

6.1 Collection and information types

We collect only personal information that is adequate, relevant and limited to what is necessary for the stated purpose. The applicable lawful basis depends on the processing activity and will not always be consent. Where information is required to provide a service, administer an event or meet a legal obligation, we will explain the consequences of not providing it.

6.1.1 Information you provide directly

You may provide personal information to us by email, through the website, by post, by telephone or in person. This may happen when you:

- contact the Charity about its work or activities;
- register for or take part in a fundraising event; or
- make a donation or purchase through the Community Involvement Department.

6.1.2 Information provided indirectly

We may receive information about you from third parties, including fundraising platforms, event organisers, payment providers or people fundraising on your behalf. The lawful basis and transparency arrangements will depend on the circumstances. We will not assume that you have consented to every subsequent use and will provide relevant privacy information where required.

6.1.3 Information from data-quality providers

We may also receive personal information from organisations that provide address validation, suppression, deceased-person screening or similar data-quality services. Before using such services, the Charity will confirm the lawful basis, complete appropriate due diligence, and provide transparent information about the source and purpose of the information.

6.1.4 Information from publicly available sources

We may use information from publicly available sources only where there is a defined purpose, an identified lawful basis, and a reasonable expectation that the information may be used in that way. Any research, profiling or wealth-screening activity must be documented, proportionate and covered by an appropriate privacy notice and, where required, a Legitimate Interests Assessment or Data Protection Impact Assessment.

This may include information from sources such as the open electoral register, published articles, charity or company websites and public social-media accounts. The availability of information to the public does not by itself provide a lawful basis for its collection or reuse.

6.1.5 Information collected through the website

The www.sfh-tr.nhs.uk website is operated by Sherwood Forest Hospitals NHS Foundation Trust. The Charity is responsible for ensuring that its website content, fundraising forms and associated processing are covered by appropriate privacy information and controls. The website uses cookies and similar technologies; the categories used, purposes, providers and retention periods are described in the website cookie notice. Non-essential analytics or advertising cookies will be set only where the applicable consent requirements are met.

Cookie and analytics data may include online identifiers such as IP addresses, device information and browsing activity and may therefore constitute personal information. Individuals can manage their choices through the website cookie controls. Information about providers, purposes, retention and any international transfers will be maintained in the website cookie notice in accordance with UK GDPR and PECR.

Where interest-based advertising or third-party audience data is used, the Charity will document the provider, purpose, lawful basis, data source, matching or profiling undertaken, relevant PECR requirements and the means by which individuals can object or withdraw consent.

The website may contain links to external websites that are not controlled by the Charity. Individuals should review the privacy information provided by those websites before submitting personal information.

6.1.6 Personal information we collect

The personal information we process depends on how you engage with the Charity, for example by making a donation, submitting an enquiry, or making a complaint.

Information we collect may include:

- Your name.
- Your contact information including address, email address, telephone numbers.
- Your date of birth.
- Your bank account or debit/credit card details, for making donations or purchases.
- Other pertinent information which you have freely provided to us in conversations or correspondence.

6.1.7 Special category information

Special category information includes information about health, racial or ethnic origin, religious or philosophical beliefs, political opinions, trade union membership, sex life or sexual orientation, and genetic or biometric data used for identification.

The Charity will collect and use special category information only where this is necessary and proportionate, for example where health information is needed to support event safety. Before processing begins, the Charity will identify and document both an Article 6 lawful basis and an Article 9 condition, apply data minimisation and appropriate access controls, and provide relevant privacy information. Information volunteered during conversations or correspondence will not be used for an unrelated purpose merely because it has been provided.

The Charity does not routinely process special category information on a large scale and will not use it for direct marketing unless the processing is lawful, transparent and within the individual's reasonable expectations.

6.1.8 Children and young people

Where fundraising activities involve children, the Charity will provide age-appropriate information and apply proportionate consent, safeguarding and verification arrangements. The minimum age and the circumstances in which parental responsibility consent is required must be defined for each activity rather than relying on a general statement that all registrants are over 18.

6.2 Purposes and lawful bases

6.2.1 How we use personal information

The Charity will use personal information only for specified, explicit and legitimate purposes, or for a compatible further purpose. Before using information for a new purpose, the Charity will assess compatibility, identify the lawful basis, update privacy information and complete a DPIA where the processing is likely to result in a high risk to individuals. Personal information may be used:

- to process donations and purchases, administer fundraising events, respond to enquiries and provide requested services, products or information;
- to invite individuals to participate in surveys or research where an appropriate lawful basis and transparency arrangements are in place;
- to publish personal stories or experiences to raise awareness of the Charity's work, subject to the controls in section 6.7.2; and
- to maintain appropriate records, manage feedback or complaints, prevent fraud, comply with legal obligations, analyse and improve Charity activities and support effective governance.

For each processing purpose, the Charity will identify and document an Article 6 lawful basis in its Record of Processing Activities and relevant privacy information. Where special category information is involved, a separate Article 9 condition is also required. The principal lawful bases used by the Charity are set out below.

6.2.2 Consent

Consent may be used where it is freely given, specific, informed and unambiguous. Consent must be recorded and be as easy to withdraw as to give.

6.2.3 Contract

Contract applies where processing is necessary to perform a contract with an individual or to take steps at their request before entering into a contract.

6.2.4 Legal obligation

Legal obligation applies where processing is necessary to comply with legislation or regulatory requirements, including financial, tax, charity, anti-fraud or reporting obligations.

6.2.5 Vital interests

Vital interests applies where processing is necessary to protect an individual's life or health, for example during an emergency at a Charity event requiring contact with others or disclosure to emergency services.

6.2.6 Legitimate interests

Legitimate interests may be used where processing is necessary for the Charity's or a third party's legitimate interests, provided those interests are not overridden by the individual's rights, freedoms or reasonable expectations.

Before relying on legitimate interests, the Charity will complete and retain a Legitimate Interests Assessment covering purpose, necessity and the balance against individual rights. Potential

uses include proportionate supporter administration, fraud prevention, data quality, internal governance, limited analysis and necessary sharing with service providers or event partners.

Individuals have the right to object to processing based on legitimate interests. Objections to direct marketing will be handled under section 6.3, including maintaining suppression records where necessary.

6.3 Marketing and supporter communications

Electronic direct marketing will comply with PECR. The charitable purposes soft opt-in is a PECR permission for electronic marketing and is not itself a UK GDPR lawful basis. Where the Charity relies on it, the Charity will also identify and document an appropriate Article 6 lawful basis for processing the individual's contact details. The soft opt-in may be used only where the Charity obtained the contact details while the individual was expressing an interest in, or offering or providing support for, one or more charitable purposes; the marketing is solely intended to further those purposes; and the individual was given a simple, free means of refusing marketing when the details were collected and in every subsequent communication.

We will respect recorded communication preferences and maintain appropriate suppression records. Every direct-marketing communication will identify the Charity and provide a clear, simple way to opt out. Telephone, post, email, SMS and social-media messaging will be managed in accordance with UK GDPR, PECR, the Fundraising Preference Service and applicable fundraising standards.

We may undertake proportionate supporter analysis, segmentation or profiling to make communications relevant, understand supporter engagement and use fundraising resources effectively. Before doing so, the Charity will document the purpose, data sources, lawful basis and balancing test; assess whether a DPIA is required; avoid unjustified inferences; explain the activity clearly; and provide a simple right to object. Any solely automated decision-making that produces legal or similarly significant effects will be identified and the applicable safeguards explained.

To update the information we hold about you, change how we contact you or stop receiving communications, please contact the Community Involvement Team by telephone on 01623 676011, by email at sfh-tr.charity@nhs.net, or by post at Community Involvement Department, King's Mill Hospital, Mansfield Road, Sutton-in-Ashfield, Nottinghamshire, NG17 4JL.

6.4 Sharing and transfers

6.4.1 Sharing personal information and using processors

The Charity does not rent, swap or sell personal information. Personal information may be shared only where this is necessary, proportionate and transparent, limited to what is required, and supported by an appropriate lawful basis and any relevant confidentiality or statutory

disclosure requirements. Recipients may include event partners, law-enforcement bodies, regulators, auditors, professional advisers and service providers acting on the Charity's behalf.

Some Charity activities are supported by processors, including payment, direct debit, fundraising platform, event, mailing, lottery, analytics, hosting and supporter-management providers. The Charity remains accountable for processing carried out on its behalf and will maintain an up-to-date processor record; complete risk-based due diligence and security assurance; put Article 28-compliant contracts and sub-processor controls in place; and document deletion or return arrangements. Supplier assurance will be reviewed periodically and following material change, and new suppliers, systems, data uses or high-risk activities must be screened under the Trust Data Protection Impact Assessment Policy before implementation.

6.4.2 International transfers

Where personal information is transferred outside the UK, the Charity will ensure that a lawful transfer mechanism and any required transfer risk assessment are in place, provide information about the relevant safeguard, and make a copy available where required. A transfer will not be based solely on an individual submitting information or on general agreement to this policy.

6.5 Information lifecycle controls

6.5.1 Security and access

The Charity will apply proportionate technical and organisational measures in line with the Trust Information Security Policy, including role-based access, secure transfer and storage, staff training, access review, incident reporting and business continuity. Access will be limited to appropriately trained staff, volunteers and contractors who require personal information for their role, reviewed regularly and removed or amended when no longer needed. Security arrangements will be reviewed when systems, suppliers or risks change.

6.5.2 Retention and secure disposal

Personal information will be retained only for as long as necessary and in accordance with the Trust Retention and Destruction Policy and the approved Charity retention schedule. Retention periods will reflect the purpose of processing, continued relevance and accuracy, potential legal claims, and applicable legal, accounting, reporting or regulatory requirements. When the retention period ends, information will be securely destroyed, anonymised or placed under a documented legal hold.

6.5.3 Personal data breaches

Any suspected loss, unauthorised access, disclosure, alteration or destruction of personal information must be reported immediately in accordance with the Trust's information reporting procedure. The Charity will ensure that incidents are assessed, contained, documented and escalated within applicable legal and organisational timescales.

6.6 Individual rights and complaints

6.6.1 Individual rights

Depending on the circumstances, individuals may have rights of access, rectification, erasure, restriction, objection, data portability, withdrawal of consent and rights relating to automated decision-making. These rights are not absolute and will be considered in accordance with data protection law and the Trust's individual-rights procedures.

Where the right to erasure applies, the Charity will delete the relevant personal information without undue delay. Information may be retained where an exemption applies or where continued retention is necessary to meet a legal obligation, establish or defend legal claims, or maintain a suppression record that protects the individual's preferences.

Requests to exercise information rights may be made to the Charity Team at sfh-tr.charity@nhs.net or to the Trust Data Protection Officer and Data Security and Privacy Team at sfh-information.governance@nhs.net. Requests will be handled in accordance with data protection law and the Trust's individual-rights procedures.

6.6.2 Complaints

- If you are unhappy with how the Charity uses your personal information, please contact the Trust Data Protection Officer and Data Security and Privacy Team at sfh-information.governance@nhs.net. General concerns or complaints about the Charity are detailed on the Trust website under Sherwood Forest Hospitals Charity – How to make a complaint [About us | Sherwood Forest Hospitals](#)

You also have the right to lodge a complaint with the Information Commissioner's Office, the UK data protection regulator.

6.7 Specific processing activities

6.7.1 Raffles and lotteries

The Charity will conduct raffles and lotteries in accordance with the Gambling Act 2005, applicable local-authority registration and the Code of Fundraising Practice. Operational requirements for permissions, ticket administration, participant eligibility, record keeping, draws, prize handling and regulatory returns are set out in the Charity's raffle and lottery procedure.

Personal information collected through raffles and lotteries will be limited to what is necessary and retained in accordance with the approved retention schedule and applicable legal and regulatory requirements. Contact details will not be used for unrelated marketing unless an appropriate lawful basis applies and PECR requirements are met.

6.7.2 Photography, case studies and personal stories

Photographs, video, quotations, case studies and personal stories must be used lawfully, fairly and transparently, with particular care where children, patients, vulnerable people or special category information are involved. Clinical information must not be obtained from Trust health records for fundraising without a separate lawful justification and appropriate confidentiality approval.

6.7.3 Artificial intelligence and new technologies

Personal information must not be entered into unapproved artificial intelligence or online tools. Any use of artificial intelligence, automated content generation, predictive analytics or automated decision-making involving personal information must be lawful, transparent, secure, proportionate and subject to appropriate human oversight, risk assessment and organisational approval.

6.8 Accountability and governance

6.8.1 Data protection by design and impact assessment

New or materially changed processing must be designed and implemented in accordance with data protection by design and default. Activities involving new systems, suppliers, data matching, profiling, monitoring, artificial intelligence, large-scale special category processing or innovative technologies must undergo DPIA screening and any required assessment and approval before processing begins.

6.8.2 Records of processing and accountability

The Charity will maintain accurate records of its processing activities, information assets, data flows, lawful bases, Article 9 conditions, processors, international transfers, retention periods, consent and preference records, Legitimate Interests Assessments, DPIAs, data-sharing arrangements and incidents. These records will be reviewed at least annually and when processing changes.

6.8.3 Changes to this policy and privacy information

We will review this policy and the public-facing privacy information regularly and following material changes. Where a change is significant, we will take reasonable steps to bring it to the attention of affected individuals. The published notice will include its effective date and version.

7.0 MONITORING COMPLIANCE AND EFFECTIVENESS

Minimum Requirement to be Monitored (WHAT – element of compliance or effectiveness within the document will be monitored)	Responsible Individual (WHO – is going to monitor this element)	Process for Monitoring e.g. Audit (HOW – will this element be monitored (method used))	Frequency of Monitoring (WHEN – will this element be monitored (frequency/ how often)	Responsible Individual or Committee/ Group for Review of Results (WHERE – Which individual/ committee or group will this be reported to, in what format (eg verbal, formal report etc) and by who)
Compliance with this policy, privacy information, and accountability records	Community Involvement Manager / relevant Information Asset Owner, supported by Data Security and Privacy Team	Documented annual assurance review covering lawful bases, privacy notices, ROPA, retention, processors, marketing preferences, DPIAs and staff access	Annually	Charitable Funds Committee Data Protection and Cyber Security Committee
Personal data breaches and information incidents relating to Charity processing	Information Governance	Review of incident records, trends, timeliness, root causes, and completion of remedial actions	Quarterly, with immediate escalation of significant incidents	Charitable Funds Committee/ Data Protection and Cyber Security Committee
Third-party processor, direct marketing, and Fundraising data compliance	Community Involvement Manager / Procurement / Data Security and Privacy Team	Third-party processor, direct-marketing, and fundraising-data compliance will be assessed through targeted sampling of supplier assurance records, contracts, opt-out handling, campaign approvals, and fundraising-partner monitoring. Material gaps and overdue remedial actions will be reported annually, with significant concerns escalated sooner.	Annually	Charitable Funds Committee/ Data Protection and Cyber Security Committee
Third-party processor, direct marketing, and Fundraising data compliance	Community Involvement Manager / Procurement / Data Security and Privacy Team	Third-party processor, direct-marketing, and fundraising-data compliance will be assessed through targeted sampling of supplier assurance records, contracts, opt-out handling, campaign approvals, and fundraising-partner monitoring. Material gaps and overdue remedial actions will be reported annually, with significant concerns escalated sooner.	Third-party processor, direct marketing, and Fundraising data compliance	Community Involvement Manager / Procurement / Data Security and Privacy Team

8.0 TRAINING AND IMPLEMENTATION

Data Security Awareness Level 1 training is mandatory at induction and annually thereafter for all staff who process Charity information. Volunteers, temporary staff, and contractors must receive role-appropriate confidentiality, security, incident-reporting and direct-marketing guidance before access is granted. Additional targeted training will be provided for staff undertaking fundraising, profiling, supporter research, supplier management or handling individual-rights requests.

The Community Involvement Manager is responsible for implementing this policy within the Charity, maintaining supporting procedures and records, and ensuring that staff, volunteers, and contractors receive relevant instructions. The Data Security and Privacy Team will provide specialist advice and assurance. Information Asset Owners remain accountable for risks and controls relating to the information assets assigned to them.

Training completion and role-specific briefings will be monitored through the Trust's established training and assurance arrangements. Information Asset Owners and Administrators must receive appropriate information-risk training, and the Charity Team must retain evidence of relevant volunteer and contractor briefings.

9.0 IMPACT ASSESSMENTS

- This document has been subject to an Equality Impact Assessment, see completed form at Appendix 1
- This document is not subject to an Environmental Impact Assessment

10.0 EVIDENCE BASE (Relevant Legislation/ National Guidance) AND RELATED SFHFT DOCUMENTS

Evidence Base:

- Charities Act 2011
- Charity Commission guidance
- Confidentiality: NHS Code of Practice [Confidentiality: NHS Code of Practice - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/nhs-code-of-practice)
- Data (Use and Access) Act 2025
- Data Protection Act 2018 [Data protection: The Data Protection Act - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/data-protection-act-2018)
- Fundraising Regulator Code of Fundraising Practice (effective 1 November 2025) [The Fundraising Badge | Fundraising Regulator](https://www.fundraisingregulator.org.uk/fundraising-badges)
- Gambling Act 2005 [Gambling Act 2005 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2005/19)
- ICO guidance on transparency, direct marketing, children's information, profiling, international transfers, and individual rights
- Information Commissioners Office [Information Commissioner's Office \(ICO\)](https://ico.org.uk/)
- Privacy and Electronic Communications Regulations 2003

- UK General Data Protection Regulation

Related SFHFT Documents:

- Corporate Records Management requirements and approved Charity retention schedule
- Data Leakage Prevention and Removable Media Policy
- Data Protection Impact Assessment Policy
- Data Protection, Confidentiality and Disclosure Policy
- Incident Reporting Procedure
- Information Governance Policy
- Information Security Policy
- Retention and Destruction Policy and Procedure
- Complaints Procedure

11.0 KEYWORDS

Charity; privacy; UK GDPR; Data Protection Act 2018; Data (Use and Access) Act 2025; PECR; fundraising; direct marketing; charitable purposes soft opt-in; donors; supporters; personal information; special category data; profiling; cookies; data protection impact assessment; processors; international transfers; information rights; personal data breach; artificial intelligence.

12.0 APPENDICES

Appendix 1 - Equality Impact Assessment Form (EQIA)

APPENDIX 1 - EQUALITY IMPACT ASSESSMENT FORM (EQIA)

Name of service/policy/procedure being reviewed: Sherwood Forest Hospitals Charity Data Protection & Privacy Policy			
New or existing service/policy/procedure: Existing			
Date of Assessment: 20 October 2026			
For the service/policy/procedure and its implementation answer the questions a – c below against each characteristic (if relevant consider breaking the policy or implementation down into areas)			
Protected Characteristic	a) Using data and supporting information, what issues, needs or barriers could the protected characteristic groups' experience? For example, are there any known health inequality or access issues to consider?	b) What is already in place in the policy or its implementation to address any inequalities or barriers to access including under representation at clinics, screening?	c) Please state any barriers that still need to be addressed and any proposed actions to eliminate inequality
The area of policy or its implementation being assessed:			
Race and Ethnicity	None	n/a	None
Gender	None	n/a	None
Age	None	n/a	None
Religion / Belief	None	n/a	None
Disability	Visual accessibility of this policy	Already in Arial font size 12. Use	
Sexuality	None	n/a	None
Pregnancy and Maternity	None	n/a	None
Gender Reassignment	None	n/a	None
Marriage and Civil Partnership	None	n/a	None
Socio-Economic Factors	None	n/a	None

(i.e. living in a poorer neighbourhood / social deprivation)			
What consultation with protected characteristic groups including patient groups have you carried out? <ul style="list-style-type: none"> None 			
What data or information did you use in support of this EqIA? <ul style="list-style-type: none"> Trust guidance for completion of the Equality Impact Assessments 			
As far as you are aware are there any Human Rights issues be taken into account such as arising from surveys, questionnaires, comments, concerns, complaints or compliments? No			
Level of impact From the information provided above and following EQIA guidance document Guidance on how to complete an EIA (click here), please indicate the perceived level of impact: Low Level of Impact For high or medium levels of impact, please forward a copy of this form to the HR Secretaries for inclusion at the next Diversity and Inclusivity meeting.			
Name of Responsible Person undertaking this assessment: Jo Thornley			
Signature: 			
Date: 20/10/2026			