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**MOBILE PHONE AND SIM CARD ACKNOWLEDGEMENT**

□ I acknowledge receipt from National Ambulance of:

□ 1 x mobile device (phone type)

□ Sim Card number – (xxx xxxxxx)

□ I will receive monthly allowance of AED xxx to cover business calls

□ I am required to port this SIM card to post-paid when my visa is issued

□ I further acknowledge that the phone has been issued for business purposes and that I have a monthly usage limit of AED\_\_\_\_\_\_\_.  Any usage over and above this amount that cannot be justified for business purposes will be deducted from my pay and I will be advised accordingly.

Employee Name:

Employee number:

Employee Signature:

Date: