

Only New Style GOS Forms Should Be Submitted With This Batch Header



ODS Code

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Practice Name & Address

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GOS3

Quantity of forms:	Total Value:
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	£ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>

**Contractor Declaration
To be completed in all cases**

I, as authorised by the contractor, wish to claim payment for the above submissions

Please sign in the box

Name		
Date		

If using normal post please send your claim forms to:	PCSE Enquiries PO Box 350 Darlington DL1 9QN
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If using courier, please send your claim forms to:	PCSE Mailroom Building 17 Lingfield Point McMullen Road Darlington DL1 1RW
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IMPORTANT NOTE

- **The MAXIMUM number of forms to be attached to a single batch header should not exceed 100 forms. If you have more than 100 forms to submit, please use separate batch headers.**
- **Only ONE batch header required per batch. Please DO NOT attach a second batch header.**