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| **2023/24 END OF YEAR PAYMENT TEMPLATE** | |
| **Pension Scheme Member name** |  |
| **Pension Scheme Membership number (SD number)** |  |
| **Practice Name** |  |
| **Practice ODS code** |  |
| **BACS reference** |  |
| **Payment date** |  |
| **Payment value (£)** |  |
| **Pensionable profit (£)** |  |
| **Employee contributions (£)** |  |
| **Tier Rate (%)** |  |
| **AVCs (£)** |  |
| **Employer contributions (£)** |  |
| **Pension year e.g. 2023/24** |  |
| **Type 1 Certificate case reference** |  |
| **COMPLETED BY** | |
| **Name** |  |
| **Email address** |  |
| **Date** |  |

Please submit this template along with the member’s Type 1 2023/24 certificate via [Contact Us](https://pcse.england.nhs.uk/contact-us/) if you have made an End of Year payment.