Locum Employer's Pension Contributions: sample invoice

<u>INVOICE</u>	Locum Employe	or or ension contributions.	sample invoice	
Dr Address UK				
Practice Manager GP Practice Address UK				
Invoice date:				
Re: Invoice for locum	work			
Invoice reference:				
DATES:				
ITEM	RATE	NUMBER	SUB - TOTAL	7
2.5 hr surgery	£		f	-
Additions (eg. a home visit)	f		£	
Subtotal			f	
Pensionable Income (90% of subtotal)			£	
Employer's Pension Contribution (14.3% of Pensionable Income)*			f	
	TOTAL (subt	otal plus employer's pensi	on contribution) f	_
Please make cheques pa BACS details Dr Sort code Account number				
Please note that if paym	ent is not made w	rithin 28 days,% interest	will be charged.	
Yours sincerely,				
Dr				
days of the month end	l. Locum Form A v	will be given to the practice	the NHS Commissioning Boa and must be signed and retu	irned t

locum with payment to confirm that the locum work has been undertaken for them and that the payment has been received from the practice.