



**HM Revenue
& Customs**

HMRC St Austell
PO Box 37
ST AUSTELL
PL25 5YN

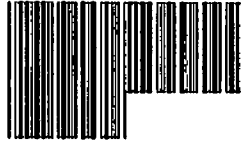
Tel: 08459 000 404, Fax: 08459 000 604
Online orders: [www.hmrc.gov.uk/
contactus/staustellform.htm](http://www.hmrc.gov.uk/contactus/staustellform.htm)
DX: 727017 St Austell 8

Mr M MISEROTTI

20.8g

Pensions Practioner.Com
33-35 Daws Lane
LONDON

NW7 4SD



MK97354

Order No: MK97354
Fulf Op: _____
Printed: 21/01/2013 at 13:53

No 3 1 1 8

Dear Mr MISEROTTI

Thank you for contacting the HMRC St Austell Orderline.

I am pleased to enclose the following items of stationery.

Description	Ref.	Version	Quantity
Pension Scheme Administrators Annual Return	RPSCOM100(Z)	2007	2

Yours sincerely

R. Kirkpatrick

Contact Centre Manager



OCR

Scheme administrator's annual return. Complete a separate form for each member of every scheme.

Return each completed form to the Centre for Research and Intelligence (CRI) by **5 October**.

For advice on completion, please contact **HMRC Savings, Pensions, Share Schemes** on **0151 472 6129**.

To obtain additional forms please contact the **HMRC orderline** on **01726 201 037**.

Completion instructions

- Please complete the boxes below in black ink using capital letters. Do not use punctuation marks.
- Left justify all entries: start in the left hand box of each field, leaving a space between words or groups of figures.

- +** • You may complete the whole form *either* in manuscript *or* by using a typeface. A sans serif font, for example **ARIAL**, **+** is preferred
- if completing by hand, ensure that each letter or digit is wholly within the white area of a box
 - if completing in print, ignore the vertical box lines but keep within the upper and lower box lines of each field.

MAKE NO MARKS ON THIS FORM OUTSIDE THE COMPLETION BOXES. DO NOT FOLD THE FORM.

Scheme details	Scheme administrator reference number											Tax year ending 5 April ccyy											
	Name of scheme administrator																						
	Pension Scheme Tax reference																						
Name of scheme member	Title			First name																			
	Surname																						
Member's personal details	Date of Birth					DD MM CCYY				Gender Enter M or F													
	National Insurance no.									Status Enter a numeral													
	Property Number			Street or Building																			
Member's permanent residential address																							
																			Postcode				
Contribution details	Scheme contributions rounded to whole pounds	Individual contributions											Employer contributions										
	Term assurance contributions in pounds	Contract																					
	National Insurance rebates from NICO	In whole pounds																					
	Transfer payment received	In whole pounds																					
Value of member's fund	In whole pounds											Date of valuation DD MM CCYY											

FMRX





OCR

Scheme administrator's annual return. Complete a separate form for each member of every scheme.

Return each completed form to the Centre for Research and Intelligence (CRI) by **5 October**.

For advice on completion, please contact **HMRC Savings, Pensions, Share Schemes** on **0151 472 6129**.

To obtain additional forms please contact the **HMRC orderline** on **01726 201 037**.

Completion instructions

- Please complete the boxes below in black ink using capital letters. Do not use punctuation marks.
- Left justify all entries: start in the left hand box of each field, leaving a space between words or groups of figures.

- +** • You may complete the whole form *either* in manuscript *or* by using a typeface. A sans serif font, for example **ARIAL**, **+** is preferred
- if completing by hand, ensure that each letter or digit is wholly within the white area of a box
 - if completing in print, ignore the vertical box lines but keep within the upper and lower box lines of each field.

MAKE NO MARKS ON THIS FORM OUTSIDE THE COMPLETION BOXES. DO NOT FOLD THE FORM.

Scheme details	Scheme administrator reference number											Tax year ending 5 April ccyy																			
	Name of scheme administrator																														
	Pension Scheme Tax reference																														
Name of scheme member	Title			First name																											
	Surname																														
Member's personal details	Date of Birth									DD MM CCYY				Gender				Enter M or F													
	National Insurance no.													Status				Enter a numeral													
	Property Number					Street or Building																									
	Member's permanent residential address																														
Contribution details	Scheme contributions rounded to whole pounds	Individual contributions										Employer contributions																			
	Term assurance contributions in pounds	Contract																													
	National Insurance rebates from NICO	In whole pounds																													
	Transfer payment received	In whole pounds																													
Value of member's fund	In whole pounds										Date of valuation DD MM CCYY																				

FMRX