



LPFA

**London Pensions
Fund Authority**

Local Government Pension Scheme

Notification of return to work

This form must be completed and forwarded to the LPFA when a person returns to work, or ceases to be employed, after a period of unpaid leave, leave on reduced pay, unpaid maternity, paternity or adoption absence, or strike.

Surname _____ Forenames _____

Mr/Mrs/Miss/Ms/other* _____ National Insurance number _____

Reason for absence _____

Date of return to work/last day of service* _____

Has the employee elected to pay pension contributions for the period of absence? Yes / No*

If the employee has elected to pay contributions for the period of absence, please arrange for the appropriate deductions to be made from the employee's pay.

** Delete as appropriate*

Employer _____ LPFA employer code _____

Signed _____ Date _____
(by responsible Officer)

Name in block capitals _____

Designation/Grade _____

Telephone number _____

Note to employer: Please send a copy of this form together with the appropriate employee's election form (LG/211-UL, MA or TD) to: London Pensions Fund Authority, Dexter House, 2 Royal Mint Court, London EC3N 4LP