Annex 13

Template Notice Return

| Name of NHS England region, non delegated CCG, or person within delegated CCG submitting this notice | Date notice was issued | Name of practice to which the notice was sent and contract reference number | Type of notice – remedial, breach, contract sanction, or termination | Reasons for issue to notice | Action (if any) required by the notice |
| --- | --- | --- | --- | --- | --- |
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