{stdlongdate} Member ID: {stdMbrPERSLinkID}

{stdMbrFullName} Purchase ID: {PurchaseID}

{stdMbrAdrCorStreet1}

{x stdMbrAdrCorStreet2}

{stdMbrAdrCorCity} {stdMbrAdrCorState} {stdMbrAdrCorZip}

**RE: PURCHASE PAYMENT INFORMATION**

Dear {stdMbrSalutation}:

This letter is in response to the NDPERS Purchase Payment Election that you completed to provide the payment information for purchasing {TotalTimeToPurchase} months of additional retirement credit.

{x when InstallmentPayment is 0}

In reviewing the information you provided, you have indicated that your monthly payments would be {ExpectedInstallmentAmount}. Your first payment must be received by **{ExpirationDate}**. You will be sent a letter confirming receipt of your first payment along with a finalized payment schedule. Unless you are eligible for a direct rollover contribution or elect to have the deductions set-up as a pre-tax payroll deduction, purchase payments must be after-tax employee contributions. For information about the pre-tax payroll deduction option, please contact NDPERS at the number listed below. If you are having your after-tax payments payroll deducted, please consult your payroll officer for this arrangement.

{x endblock}

{x quwhen rollover/transfer has 0}

You indicated that you would like to rollover funds from an eligible employer plan. To be eligible, the funds must be certified as **pre-tax** dollars and come from a 401(a), a 401(k), a 457, a 403(b), a traditional IRA, a Federal Employee Retirement System Thrift Savings Plan, or a 401(c) Keogh plan whose deposits came only from a qualified 401(a) or (k). A **Rollover Request for Service Credit Purchase SFN 52059** to verify the eligibility of the rollover must be received at NDPERS prior to a payment being made.

The retirement portion of the purchase can be paid for by the eligible rollover and must be a lump sum payment of {PaymentAmtAssociatedWithLumpSumPayment}.

{x if Main2020orDC2020 = 0}

You will need to send a personal check for {RHICBalance} to pay for the retiree health credit portion of the purchase. Both payments must be received by **{PaymentDueDate}** and you will receive written confirmation from NDPERS that the funds have been received.

{x endif}

{x endblock}

{x quwhen AdditionalInsertStatementFromFiduciary has 0}

Also, we will need a statement from the fiduciary of your eligible plan verifying that you no longer have funds in their plan for your years of service. This is required due to federal and state laws that indicate that to purchase these years of service, you can not be entitled to receive benefits from another employer sponsoredplan.{endblock}

{x when InstallmentPayment is 1}

In reviewing the information you provided, we have determined that you will be able to make a lump sum payment of {TotalLumpsumPaymentAmt}. Your payment must be received by **{PaymentDueDate}**.

{x endblock}

Your purchased retirement credit will be prorated to your account as payments are received. Simple interest at the actuarial rate of return is charged on the unpaid balance. Payments must be received in our office prior to the 15th of the month to ensure proper crediting to that month. Your entire purchase payments are credited to your member account balance.

{x if Main2020orDC2020 = 0}

This money, with the exception of the retiree health insurance credit portion, earns interest along with your retirement contributions at a rate established by the NDPERS Board. Understand that you do not have access to these monies while you are an active contributing member.

{x else}

This money earns interest along with your retirement contributions at a rate established by the NDPERS Board. Understand that you do not have access to these monies while you are an active contributing member.

{x endif}

If you have any questions, please call NDPERS at {stdNDPERSPhoneNumber} or {stdNDPERSTollFreePhoneNumber}.

Sincerely,

NDPERS Benefits Division

{x quIf rollover/transfer is “0”}

Enclosure – Rollover Request for Service Credit Purchase SFN 52059

{tmp SFN-52059}

{endblock}