{stdlongdate} Member ID: {stdMbrPERSLinkID}

{stdMbrFullName}

{stdMbrAdrCorStreet1}

{x stdMbrAdrCorStreet2}

{stdMbrAdrCorCity} {stdMbrAdrCorState} {stdMbrAdrCorZip}

**RE: Deferred Compensation Contributions**

Dear {stdMbrSalutation}:

A contribution of {qu ContributionAmount} was **not** withheld from your {qu PayPeriodStartDate} wages paid {qu PayCheckDate} for the Deferred Compensation Plan. According to our records, this contribution was effective with the pay period begin date of {qu ApprovedPayPeriodBeginDate}. A copy of this letter has been sent to your payroll department requesting this deduction to begin on the next payroll.

With your consent, a one-time adjustment can be made for the missed deduction amount of {qu ContributionAmount} this pay period on the next pay period totaling double your normal deduction or just the new deduction can start going forward. Please notify your employer of your intentions.

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

Sincerely,

NDPERS Accounting Division

CC:

{stdOCName}

{stdOrgName}

{stdOCAdrCorStreet1}

{x stdOCAdrCorStreet2}

{stdOCAdrCorCity} {stdOCAdrCorState} {stdOCAdrCorZip}

{stdlongdate} Organization ID: {stdOrgCodeId}

{stdOCName}

{stdOrgName}

{stdOCAdrCorStreet1}

{x stdOCAdrCorStreet2}

{stdOCAdrCorCity} {stdOCAdrCorState} {stdOCAdrCorZip}

**RE: Deferred Compensation Contributions –** ({stdMbrFullName}, {stdMbrPERSLinkID})

Dear {stdOCSalutation}:

This employee elected to have a contribution withheld for the Deferred Compensation Plan in the amount of {qu ContributionAmount} beginning with the pay period begin date of {qu PayPeriodStartDate} paid {qu PayCheckDate}. According to our records, this contribution isn’t currently being reported to NDPERS. Please begin this deduction on the next payroll.

Please note, a one-time adjustment can be made to this deduction for the missed amount this pay period with the employee’s consent or the deduction can start going forward. Please verify with your employee of their intentions. If they choose to do the makeup contribution, we need an email with their consent for documentation purposes.

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

Sincerely,

NDPERS Accounting Division

CC:

{stdMbrFullName}

{stdMbrAdrCorStreet1}

{x stdMbrAdrCorStreet2}

{stdMbrAdrCorCity} {stdMbrAdrCorState} {stdMbrAdrCorZip}