{stdlongdate} Member ID: {stdMbrPERSLinkID}

{stdMbrFullName}

{stdMbrAdrCorStreet1}

{x stdMbrAdrCorStreet2}

{stdMbrAdrCorCity}{stdMbrAdrCorState}{stdMbrAdrCorZip}

**RE: FLEXCOMP REFUND**

Dear {stdMbrSalutation}:

You will receive a refund of ${qu refundamount}, less tax for FlexComp deductions withheld from your {qu payrolldate} paycheck. Your participation in the FlexComp plan ended {qu PlanEndDate}.

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

Sincerely,

NDPERS Benefits Division