{stdlongdate} Member ID: {stdMbrPERSLinkID}

{stdMbrFullName}

{stdMbrAdrCorStreet1}

{x stdMbrAdrCorStreet2}

{stdMbrAdrCorCity} {stdMbrAdrCorState} {stdMbrAdrCorZip}

**RE: FINANCIAL HARDSHIP APPLICATION – CASE #** **{ CaseID }**

Dear {stdMbrSalutation}:

This is to inform you that your request for a hardship withdrawal was approved by the NDPERS’ Board at its {qu HardshipApplicationReviewedDate } meeting. You have been approved to withdraw {HardshipWithdrawalAmount} from your 457 account with {qu Provider}. Please contact your agent to complete the appropriate forms for distribution. A copy of this letter has been forwarded to {qu Provider} as substantiation that you have been approved for this distribution.

Also, IRC 457 stipulates that if you take a hardship distribution, you cannot contribute to your 457 account for six (6) months from the date of the approved distribution. A form to suspend your current deduction is enclosed. Please complete as soon as possible and return the form to your payroll office for processing.

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

Sincerely,

NDPERS Benefits Division

Enclosure -

C: {qu Provider}