{stdlongdate} Member ID: {stdMbrPERSLinkID}

{stdMbrFullName}

{stdMbrAdrCorStreet1}

{x stdMbrAdrCorStreet2}

{stdMbrAdrCorCity} {stdMbrAdrCorState} {stdMbrAdrCorZip}

**RE: APPOINTMENT CONFIRMATION**

Dear {stdMbrSalutation}:

This is to confirm that you have an appointment with {Counselor} on {AppointmentDate} at {AppointmentStartTime} to {AppointmentEndTime} Central Time.

The NDPERS office is located at: 1600 East Century Avenue, Suite 2, Bismarck, ND.

We will discuss your retirement and insurance options and complete the required forms together.

In preparation for this meeting, please bring the following item(s) with you:

1. Your last day (this includes if you are vacationing out)
2. Last regular paycheck date
3. Ask your payroll or human resources person what retirement reporting month your last paycheck is considered for NDPERS retirement
4. When your health insurance will end
5. Your sick leave balance
6. Your birth certificate
7. Your spouse’s birth certificate & marriage certificate (if married)
8. Medicare card showing Parts A and B enrollment (if Medicare eligible) for you or any eligible dependents
9. Beneficiary information - Please complete enclosed 2560 form and bring to the appointment
10. Your bank routing number and account number or a voided check

**\*\*NOTE – Your first payment may be by physical check**

1. Your retirement is taxable – Please complete enclosed tax forms (51506 and W4P) and bring to the appointment   
   *NDPERS counselors are not tax professionals and we cannot advise you.*

If you would like to, you can run estimates prior to our meeting at Member Self Service (MSS) (https://www.ndpers.nd.gov/member-self-service-mss)

If you need to cancel this appointment, please contact NDPERS at {stdNDPERSPhoneNumber} or toll free at {stdNDPERSTollFreePhoneNumber}.

Sincerely,

{Counselor}

NDPERS Benefits Division

{tmp SFN-51506}

{tmp SFN-02560}