{stdlongdate} Member ID: {stdMbrPERSLinkID}

{stdMbrFullName}

{stdMbrAdrCorStreet1}

{x stdMbrAdrCorStreet2}

{stdMbrAdrCorCity} {stdMbrAdrCorState} {stdMbrAdrCorZip}

**YOUR IMMEDIATE ATTENTION IS REQUIRED**

**RE: OUTSTANDING CHECK(S)**

Dear {stdMbrSalutation}:

{ x quwhen Flex has “1”}

We were notified by ASI Flex that one of the flexible spending reimbursement checks you have been issued has not yet been cashed as of {stdlongdate}.

{x endblock}

{ x quwhen Flex has “0”}

We were notified by ASI Flex that one of the Retiree Health Insurance Credit (RHIC) checks you have been issued has not yet been cashed as of {stdlongdate}. Please update your direct deposit information with ASIFlex either online or by calling the phone number listed below to avoid any delay in your future RHIC payments. You may also submit the enclosed Authorization for Direct Deposit for Annuity Payments Form SFN 18379 to NDPERS if you are updating both your NDPERS monthly retirement payment and ASIFlex monthly RHIC payment.

{x endblock}

The purpose of this letter is to request that you cash the outstanding check(s) you are holding at your earliest convenience. If you have lost the check in question, please contact ASI Flex at (800) 659-3035 and a replacement check will be issued.

The outstanding check in question is listed below:

|  |  |  |
| --- | --- | --- |
| **Date of Check** | **Check Number** | **Check Amount** |
| {qu DateOfCheck} | {qu CheckNumber} | {qu CheckAmount} |

*If you have already cashed the check listed above, please disregard this letter.*

If you have any questions, please call ASI Flex directly at (800) 659-3035.

Sincerely,

NDPERS Benefits Division

{ x quwhen Flex has “0”}

Enclosure - SFN 18379 Authorization for Direct Deposit for Annuity Payments

{tmp SFN-18379}

{x endblock}