



**NOTICE OF IRREGULAR SALARY OR NO DEPOSIT**  
NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM  
SFN 53707 (Rev 12-2009)

NDPERS • PO Box 1657 • Bismarck, • North Dakota 58502-1657  
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<b>PART A MEMBER INFORMATION</b>	
Name (Last, First, Middle)	NDPERS Member ID
Last 4 digits of Social Security Number	Date of Birth
Organization Name:	NDPERS Organization ID
<b>PART B NOTICE OF IRREGULAR SALARY OR MISSED DEPOSIT</b>	
<input type="checkbox"/> Leave of Absence/Leave without Pay (Notice of Status or Employment Change SFN 53611 is attached)	
<input type="checkbox"/> Hourly Employee – Hours Vary from Month to Month	
<input type="checkbox"/> Reporting Error – Salaries should be credited as follows: _____ (Month) \$ _____ (Amount) _____ (Month) \$ _____ (Amount)	
<input type="checkbox"/> Retirement Contributions Missed on All or a Portion of a Previous Salary – Salaries should be credited as follows: _____ (Month) \$ _____ (Amount) _____ (Month) \$ _____ (Amount)	
<input type="checkbox"/> Seasonal Employee <input type="checkbox"/> Employee and Employer have a formal salary arrangement/contract in place. Excess Salary to be annualized over current contract year: Excess Salary \$ _____ to be distributed from _____ (Month/Year) to _____ (Month/Year) <input type="checkbox"/> Employee and Employer have <b>no</b> formal salary arrangement/contract in place. Excess Salary \$ _____ to be distributed over physical work period from _____ (Month/Year) to _____ (Month/Year)	
<input type="checkbox"/> Membership Termination (Notice of Status or Employment Change SFN 53611 is attached)	
<input type="checkbox"/> Other:	
<b>PART C AUTHORIZATION OF AUTHORIZED AGENT</b>	
I certify that the above information is true and correct.	
_____	_____
Authorized Agent Signature	Date of Signature

## INSTRUCTIONS

### **PART A                    MEMBER INFORMATION**

Enter member's name and NDPERS ID, last four digits of social security number, and date of birth

### **PART B            NOTICE OF IRREGULAR SALARY OR NO DEPOSIT**

Complete this section to document:

1.     An irregular salary
2.     A missed retirement contribution
3.     A seasonal employee's salary agreement

Complete this section to:

1. To direct an adjustment to a previously posted salary(ies)
2. To initiate a bill to your agency for a missed contribution

### **PART C                    AUTHORIZATION OF AUTHORIZED AGENT**

Your agency's designated PERS authorized agent must sign and date this form.