




WorkFor From Client File
 Pension Benefit Information
 PO Box 1389
 Fort Washington, PA 19034



September 02, 2022
Reference # 0
Letter ID

114 T42 P89
 FirstName MiddleName LastName
 123 Sample St
 New York, NY 12345




Dear FirstName MiddleName LastName:

WorkFor From Client File

The above company records indicate you are an inactive member of the Public Employees' Retirement System of Nevada who is fully eligible to receive a monthly lifetime benefit based on your past employment with a Nevada public employer. Once you reach age 72 ½, PERS must provide notification of the IRS required minimum distribution regulation that requires you to begin receiving the benefit you have earned in the system.

Please do ONE of the following:

- **Visit** us at <https://locate.pbinfo.com> to confirm or update your information. You will need the reference number and letter ID at the top of this notice.
- **Call** us at (855) 607-4132 ext. 3101. We are available Monday - Friday from 8am - 5pm Eastern Time.
- **Complete** and return the form below in the envelope provided.

Your response is important. If we do not hear from you, you may not receive timely benefit information and you could miss important deadlines. By providing Pension Benefit Information, LLC with your personal information through one of the means described above, you consent to our collection of your personal information and direct us to disclose your personal information to the organization or plan above, its affiliate, or its service provider. This letter is being sent to you so that your benefit information can be distributed to you. Thank you for your cooperation. PBI's Privacy Policy is available at www.pbinfo.com/privacy-policy.

You can visit www.pbinfo.com/letter to get answers to our most frequently asked questions.

----- (Please return portion below in the enclosed envelope) -----

Check One



Reference # 0
Letter ID

- The Address information at the right is correct
- The Address information at the right is incorrect. I have made changes to correct the information
- If the addressee is deceased, please supply beneficiary information below

FirstName LastName
123 Sample St
New York, NY 12345

Corrected Address:

Date of Death: _____
 Beneficiary Name: _____
 Relationship: _____
 Beneficiary Address: _____

