

CHAPTER 6

BENEFITS

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CHAPTER 6

BENEFITS

1. INTRODUCTION.

a. This chapter provides a description of financial benefits survivors **may** be entitled to. The benefits described are subject to change. Although providing factual information to designees is crucial, utilizing extreme sensitivity regarding how and when such information is conveyed cannot be overemphasized.

b. When presenting pay warrants and other benefit documentation to designees, special care should be taken to ensure such transactions take place in a comfortable and private environment. Funerals and ceremonies **are not** the appropriate time to convey such information. Additionally, it is important to allow sufficient time to explain benefits and thoroughly answer any questions or provide clarification of benefits.

c. Pay warrants and other financial or benefit checks should be provided directly to the surviving spouse/significant other as soon as possible following the death. Immediate monetary payment to surviving family members is imperative to help reduce feelings of the loss of financial security that can follow the death of a spouse/significant other.

d. The financial benefits contained in this chapter, to which survivors may be entitled, require submission of a **certified copy** of a death certificate. As such, it is recommended at least 15 **certified copies** of the death certificate are obtained. These copies are normally provided by the involved funeral director; however, copies can also be acquired through the local County Recorder's office in which the death occurred, or through the Office of the State Registrar in Sacramento.

e. **Benefits for uniformed members are different than those for nonuniformed employees.** The Disability and Retirement Unit (DRU) should be considered a valuable resource in determining these differences.

2. PAY WARRANTS.

a. Commanders or assigned supervisors should immediately contact the Personnel Transaction Unit (PTU) at (916) 843-3700, for information regarding California Public Employees' Retirement System (CalPERS) death benefits. This contact should be made when an employee is seriously injured, terminally ill, or has passed away.

b. Warrants that are due to the deceased employee can only be released to the designee indicated on the STD. 243, Designation of Person(s) Authorized to Receive Warrants. For additional information, refer to Highway Patrol Manual 10.3, Personnel Transactions Manual, Chapter 31, Deceased Employees.

NOTE: The person designated on the STD. 243 may be someone other than the beneficiary for retirement and other benefits.

c. In order to issue pay warrants, PTU must receive the following:

- (1) Copy or faxed copy of certified death certificate.
- (2) Final attendance report.

d. The designee shall be entitled to receive warrants issued to the employee for the following:

- (1) Monthly pay.
- (2) Overtime/shift differential.
- (3) Lump sum payment for credits (vacation, annual leave, personal leave, personal holiday, excess hours).
- (4) Compensating time off.
- (5) Travel reimbursement.
- (6) Uniform allowance.

e. Warrants are issued in the name of the employee and not the designee.

f. Warrant Endorsement. If the pay warrant was sent prior to the death of the employee and the designee's bank will not cash the warrant, the warrant should be returned to the Fiscal Management Section (FMS) for the appropriate departmental endorsement. If the warrant was issued after the employee's death, the warrant should have the appropriate endorsement as indicated in the example below:

The California Highway Patrol (CHP) hereby certifies that, pursuant to Section 12479 of the Government Code of California, the payee has designated:

(Name of Designee)

to receive and negotiate this warrant, and that said designation is filed with this Department:

By: _____

Title: _____

g. If no designee is listed and the pay warrant was sent prior to the death of the employee, the warrant should be returned to the FMS.

3. CALIFORNIA PUBLIC EMPLOYEES' RETIREMENT SYSTEM DEATH BENEFITS.

a. Commanders or assigned supervisors should contact DRU immediately, at (916) 843-3130, for information regarding CalPERS death benefits when an employee is either seriously injured, terminally ill, or has passed away.

b. The amount of benefits that will be paid to a beneficiary or survivor will vary according to the option selected and circumstances of the death.

c. The amount of the death benefit is determined by whether or not the deceased employee was eligible to retire.

d. The benefits provided by CalPERS differ for uniformed employees as compared to nonuniformed employees. The benefits are also different between on-duty deaths and off-duty deaths of active employees.

e. Benefits may be provided in a lump sum or paid monthly.

f. In order to issue death benefits, CalPERS must receive the following:

- (1) Copy of certified death certificate.
- (2) Certified copy of marriage certificate/registered domestic partnership.
- (3) Birth certificate(s) for all children.
- (4) Final divorce decree(s).

g. Benefits will be paid to the beneficiary on file, or if none, in the following order:

- (1) Spouse/registered domestic partner.
- (2) Children (including adopted children).

- (3) Parents.
- (4) Brothers and sisters.
- (5) Estate, if probated or subject to probate.
- (6) Trust, if one exists.
- (7) Stepchildren.
- (8) Grandchildren (including step grandchildren).
- (9) Nieces and nephews.
- (10) Great grandchildren.
- (11) Cousins.

h. A DRU representative may arrange to meet with the commander, assigned CalPERS death benefit specialist, and the survivor to explain the options in detail. The CalPERS benefits are also explained in brochures which are available from CalPERS (PERS-PUB-3 and PUB-3D).

i. Before the DRU contacts CalPERS with a death notification, the commander or assigned supervisor will need to forward a Communications Network message with the appropriate information. (Refer to Chapter 3, Memorial Service Planning, Annex E, of this manual.)

4. HEALTH BENEFITS. In addition to information located in the employee's field folder, please contact the Department's Human Resources Section at (916) 843-3700 for the most current information.

5. WORKERS' COMPENSATION.

a. Workers' compensation coverage is compulsory for employers in California.

b. Burial. Labor Code Section 4701 makes employers liable for reasonable expenses of an employee's burial when an on-the-job injury causes death, either with or without disability. The employer shall be liable for reasonable expenses of the employee's burial not to exceed \$5,000.

c. Death Benefits. Labor Code Section 4702 describes the following on-duty death benefits:

(1) In the case of 3 or more total dependents, regardless of the number of partial dependents, \$320,000.

(2) In the case of 2 total dependents, regardless of the number of partial dependents, \$290,000.

(3) In the case of 1 total dependent and one or more partial dependents, \$250,000 plus 4 times the amount annually devoted to the support of the partial dependent, but not more than \$290,000.

(4) In the case of 1 total dependent and no partial dependents, \$250,000.

NOTE: Per Labor Code Section 4703.5, the statutory maximum amount may be exceeded depending on the age of minor children and the dependents' physical and/or mental capacity for earning wages.

(5) In the case of no total dependents and one or more partial dependents, 4 times that amount annually devoted to the support of the partial dependents, but not more than \$250,000.

(6) In the case of no total dependents and no partial dependents, \$250,000 to the estate of the deceased employee.

(7) The death benefit in all cases shall be paid in installments in the same manner and amounts as temporary disability indemnity would have to be made to the employee, unless the appeals board orders otherwise. However, no payments shall be made at a weekly rate of less than \$224.

d. Scholarship. Labor Code Section 4709 entitles the dependents of a peace officer killed in the line of duty to educational scholarships under the Cal Grant Program as described in Education Code Section 69430.

6. FEDERAL BENEFITS – PUBLIC SAFETY OFFICERS' BENEFITS ACT.

a. The Public Safety Officers' Benefits (PSOB) Act provides a \$339,881 benefit to eligible survivors of a public safety officer whose death is the direct and proximate result of a traumatic injury sustained in the line of duty. The PSOB Act also provides the same benefit to a public safety officer who has been permanently and totally disabled as the direct result of a catastrophic personal injury sustained in the line of duty. The injury must permanently prevent the officer from performing any gainful work. (This benefit has been approved for quadriplegics and people existing in a comatose state.)

(1) The benefit was increased from \$50,000 to \$100,000 for deaths occurring on or after June 1, 1988. Beginning on October 1, 1988, the benefit will be adjusted annually by the percentage of change in the Consumer Price Index.

(2) Effective October 1, 2009, public safety officers may designate their beneficiary. The PSOB beneficiary form may be accessed via www.psob.gov. This form must be completed and in the employee's personnel file at the time of death to be valid.

b. Effective Dates.

(1) Death Benefits. State and local law enforcement officers and firefighters are covered for injuries sustained on or after September 29, 1976. Federal law enforcement officers and firefighters are covered for injuries sustained on or after October 12, 1984. Members of public, federal, state, local rescue squads, and ambulance crews are covered for injuries sustained on or after October 15, 1986.

(2) Disability Benefits. Federal, state, and local law enforcement officers, firefighters, and members of public rescue squads and ambulance crews are covered for injuries on or after November 29, 1990.

c. Eligible Public Safety Officers.

(1) Definition of Public Safety Officers. A public safety officer is a person serving a public agency in an official capacity, with or without compensation, as a law enforcement officer, firefighter, or member of a public rescue squad or ambulance crew. Law enforcement officers include, but are not limited to: police, corrections, probation, parole, and judicial officers. Volunteer firefighters and members of volunteer rescue squads and ambulance crews are covered if they are officially recognized or designated members of legally organized volunteer fire, rescue, or ambulance departments.

(2) Eligibility. A public safety officer's death, or total and permanent disability, must result from injuries sustained in the line of duty. Deaths or permanent and total disabilities resulting from stress and strain; occupational illness; or chronic, progressive, or congenital disease, such as heart or pulmonary disease, are not covered by the PSOB Act unless there is a traumatic injury which is a substantial factor in the death or permanent and total disability. Medical proof of the traumatic injury, such as a blood test for carbon monoxide, may be essential for coverage in such cases. "Line of duty" is defined as any action that the public safety officer is authorized or obligated to perform by law, rule, regulation, or condition of employment or service. If law enforcement, fire suppression, rescue, or ambulance service is not a person's primary function,

in order to be covered by the Act, the person must be engaged in authorized law enforcement, fire suppression, rescue, or ambulance duties when the fatal or disabling injury is sustained.

NOTE: On December 15, 2003, the Hometown Heroes Survivors' Benefits Act became law. The legislation creates a presumption that a public safety officer who suffered a fatal heart attack or stroke up to 24 hours after on-duty, nonroutine, stressful or strenuous physical activity or training has died as a direct and proximate result of a personal injury sustained in the line of duty. The PSOB regulation, including the provisions that implement the Hometown Heroes Survivors' Benefits Act, was published in the Federal Register on August 10, 2006, and became effective on September 11, 2006. When a public safety officer dies on or after December 15, 2003, as the direct result of heart attack or stroke, the PSOB Program looks at the claim under the Hometown Heroes Survivors' Benefits Act provisions of the PSOB Act.

(3) Definition of Public Agency. "Public Agency" is defined as the Government of the United States (U.S.); any government of a state within the U.S.; the District of Columbia; the Commonwealth of Puerto Rico; any territory or possession of the U.S.; or any unit of local government, or combination of such states or units; or any department, agency, or instrumentality of any of the foregoing.

d. Eligible Survivors. Once the U.S. Department of Justice (DOJ) approves a claim for death benefits, the benefit will be paid in a lump sum as follows:

(1) If there is no surviving spouse or registered domestic partner, to the child or children of the officer, in equal shares.

(2) If there is no surviving child of the deceased officer, to the surviving spouse or registered domestic partner.

(3) If there is a surviving child or children, and a surviving spouse or registered domestic partner, one-half to the child or children in equal shares, and one-half to the surviving spouse or registered domestic partner.

(4) If none of the above, to the parent or parents of the officer, in equal shares.

e. Eligible Child Survivors. Under the Act, "child" means any natural, illegitimate, adopted, posthumous, or stepchild of a deceased public safety officer who is:

(1) Eighteen years of age or younger.

(2) Between the ages of 19 and 22 years, who has not completed four years of education beyond high school, and who is pursuing a full time course of study or training.

(3) Age 19 years or over and incapable of self-support because of a physical or mental disability.

f. Limitations and Exclusions. No benefit can be paid:

(1) If the death or permanent and total disability was caused by the intentional misconduct of the public safety officer, or by such officer's intention to bring about their own death or permanent and total disability.

(2) If the public safety officer was voluntarily intoxicated at the time of death or permanent and total disability.

(3) If the public safety officer was performing their duties in a grossly negligent manner at the time of death or permanent and total disability.

(4) To a claimant whose actions were a substantial contributing factor to the death of the public safety officer.

(5) To military law enforcement officers or to any of their survivors.

g. Reduction of Benefits. State and local benefits should not be reduced by benefits received under the PSOB statute. The PSOB benefit is not reduced by any benefit that may be received at the state or local level (*Rose vs. Arkansas*). The reduction in benefit made under the District of Columbia Code may result in a lesser benefit under Section 8191 of the Federal Employees' Compensation Act.

h. Interim Payment. When the DOJ determines, upon showing of need and prior to taking final action, that a death benefit will probably be paid, an interim benefit payment not exceeding \$3,000 may be made to the eligible survivor(s).

i. Attachment Tax Exemption. The Attachment Tax Exemption Act ensures the benefit will not be subject to execution or attachment by creditors. The Internal Revenue Service has ruled that the benefit is not subject to federal income tax (Revenue Ruling No. 77-235, IRB 1977-28) or to federal estate tax (Revenue Ruling No. 79397).

j. Attorney Fees. The PSOB Act of 1976, Public Law 94430, authorizes the DOJ to prescribe the maximum fee that a representative may charge a claimant for services rendered in connection with any claim before the Bureau of Justice Assistance. Contracts for a stipulated fee and contingent fee arrangements are

especially prohibited by the PSOB regulations, per Title 28, Code of Federal Regulations, Part 32.22(b). The DOJ assumes no responsibility for payment.

k. Filing a Claim. The commander shall notify the PSOB of a line of duty death to initiate the claim forms. (Refer to Annex A.) Claim forms should be mailed to the Area/Division. Should assistance be required in completing the forms, contact DRU at (916) 843-3130. The completed packet should be sent to DRU for approval and submission.

7. FEDERAL WORKERS' COMPENSATION BENEFITS FOR NONFEDERAL LAW ENFORCEMENT OFFICERS. Under certain conditions, benefits may be provided to a nonfederal law enforcement officer killed in the line of duty as determined by the U.S. Department of Labor. Essentially, these benefits are provided if a state or local enforcement officer is killed while engaged in the apprehension or attempted apprehension of a person who has committed a crime against the U.S. or who is being sought by a law enforcement authority of the U.S. The benefit is also extended to those killed while engaged in the lawful prevention or lawful attempt to prevent the commission of a crime against the U.S. Further, the program encompasses those engaged in protecting or guarding a person held for the commission of a crime against the U.S. or as a material witness. The law enforcement agency must initiate the claim. Contact: Office of Workers' Compensation Programs, Special Claims Office, United States Department of Labor, District 13, 90 Seventh Street, Suite 15300, San Francisco, CA 94103, (415) 625-7500, fax (415) 625-7450.

8. MISCELLANEOUS DEATH BENEFITS.

a. 11-99 Foundation Benefits. The 11-99 Foundation provides assistance to both uniformed and nonuniformed employees as a gesture of gratitude for the services CHP employees provide the people of the State of California.

(1) The 11-99 Foundation does provide for a death benefit for active departmental employees; however, each case will be considered individually according to the Foundation's death benefit guidelines.

(2) This benefit is **not** an entitlement like other statutory or regulatory provisions. However, in most cases, survivors will receive this benefit with the 11-99 Foundation reserving the right to withhold it consistent with the Foundation's Board of Directors' guidelines.

(3) In the event of an employee death, commanders should discuss death benefit coverage with the departmental liaison.

(4) Upon the death of an on-duty employee, the Foundation can provide the commander with a check for \$2,000 to be utilized for miscellaneous command expenses including funeral reception costs, etc., when requested.

(5) Additionally, depending on the circumstances surrounding the death, the employee's family can receive \$10,000 to \$25,000 to be used to provide transportation for family members and to offset burial/cremation costs.

b. 1959 Survivor Benefit Program.

(1) The 1959 Survivor Benefit Program provides a monthly allowance to eligible survivors of members who were covered for this benefit program and died before retirement. This benefit coverage is available by contract amendment for those members who are not covered by federal social security. Covered members are required to pay a \$2 monthly fee that is deducted from their salary specifically to fund the 1959 Survivor Benefit Program.

(2) The 1959 Survivor Benefit allowance is payable in addition to any other preretirement death benefit paid by CalPERS, with the exception of the Special Death Benefit. If the 1959 Survivor Benefit is greater than the Special Death Benefit, then the difference is paid as the 1959 Survivor Benefit. Please refer to your CalPERS Member Benefit Booklet for information on the Special Death Benefit and other preretirement death benefits.

(3) Upon a member's preretirement death, the commander or DRU and the surviving spouse, registered domestic partner, or dependent children should immediately contact CalPERS for assistance.

(4) Monthly Benefit Levels. Currently, there are five different benefit levels. The applicable level depends on the contract CHP has with CalPERS.

(a) The following chart lists the amounts payable monthly, under each level, depending on the number of eligible survivors:

<u>Benefit Level</u>	<u>One Survivor</u>	<u>Two Survivors</u>	<u>Three or More Survivors</u>
Level 1*	\$180	\$360	\$430
Level 2*	\$225	\$450	\$538
Level 3*	\$350	\$700	\$840
Level 4	\$950	\$1,900	\$2,280
Level 5	\$750	\$1,500	\$1,800

(*) These levels are closed to further contracting.

c. Eligible Survivors.

(1) Spouse/Registered Domestic Partner. A surviving spouse or registered domestic partner is a husband or wife who was legally married to the member either one year before the member's death, or before the occurrence of the injury or onset of the illness that resulted in the member's death. A surviving spouse or registered domestic partner is entitled to the 1959 Survivor Benefit as long as the surviving spouse or registered domestic partner has care of an eligible child, or is at least age 62 (age 60 at Level 4, 5, and under the Indexed Level). A surviving spouse may remarry and continue to receive the allowance.

(2) Children. An unmarried child of the member or an unmarried stepchild (if the child was living with the member in a parent-child relationship) is eligible for benefits while under age 22. A disabled unmarried child whose disability began before attaining age 22 may be entitled to the benefit until the disability ends. If a child is in the care of a guardian or is living on their own, the child's portion of the benefit is payable directly to the guardian or to the child, rather than to the surviving spouse.

(3) Parents. A parent may be eligible if there is not a surviving spouse or eligible children, and the parent(s) was dependent on the member for at least half of their support at the time of the member's death.

(4) If you have questions or need further information about the 1959 Survivor Benefit Program, please contact your nearest CalPERS office.

CalPERS Benefit Services Division
P.O. Box 942711
Sacramento, CA 94229-2711
(888) 225-7377
(916) 795-3240 Telecommunications, Device for the Deaf
(916) 795-3988 Fax
CalPERS On-Line – www.calpers.ca.gov

d. California Narcotic Officers' Association.

(1) The California Narcotic Officers' Association (CNOA) has established a memorial fund providing for the following death benefits:

(a) A \$5,000 benefit for any **member** killed in the line of duty while actively enforcing narcotics laws.

- (b) A \$2,500 benefit for any **member** killed in the line of duty.
- (c) A \$1,000 benefit for any **nonmember** killed in the line of duty while enforcing narcotics laws.
- (d) A \$500 benefit for any **nonmember** killed in the line of duty.

(2) An additional \$10,000 in Accidental Death and Dismemberment (AD&D) Insurance will be paid for a **member** of CNOA who is killed in the line of duty.

(3) A claim may be filed by contacting the State Office of the California Narcotic Officers' Association at (661) 775-6960, or toll free at (877) 775-6272, or by fax at (661) 775-1648.

e. National Rifle Association. If a police officer, with or without compensation, is feloniously killed in the line of duty and is a current member of the National Rifle Association (NRA), the surviving spouse/family is entitled to a \$25,000 death benefit.

(1) The NRA must be contacted within **90 days** of the officer's death by contacting the Association Group Insurance Administrator at (877) 672-3006. You will need the member's name and NRA membership number.

f. American Association of State Troopers.

(1) The American Association of State Troopers offers membership to all full-time currently active or retired troopers and state police officers.

(2) The insurance package includes (after a six-month waiting period):

(a) A \$7,500 term life insurance (this benefit is not reduced by age).

(b) A \$7,500 AD&D benefit (this benefit pays an extra \$7,500 in the event of an accidental death).

(c) A \$7,500 line of duty benefit (this benefit pays an extra \$7,500 in the event of a death occurring in the line of duty).

(d) A \$7,500 seat belt benefit (this benefit pays an extra \$7,500 if the member is killed in a car crash while wearing a seat belt).

(e) A \$5,000 air bag benefit (this benefit pays an extra \$5,000 if the member is killed in a car crash while wearing a seat belt and the air bag deploys).

(f) Accidental Death and Dismemberment Family Benefits Package. This benefit includes child care, career adjustment, and higher education benefits for the member's spouse and children.

(g) Repatriation Benefit. This benefit will pay certain expenses related to transporting the remains of any member who dies more than 200 miles from their primary residence.

(h) MedEx Travel Assistance Program. This includes benefits for many services for members and their eligible dependents traveling more than 100 miles from home, including: Emergency Evacuation; Passport, Credit Card, and Ticket Replacement; Missing Baggage Assistance; Legal Service Location; and Bail Bond Services.

(3) Up to \$2,500 in scholarships for trooper members' dependents who qualify.

9. VETERANS' BENEFITS. Information or help in applying for veterans' benefits is available by writing, calling, or visiting a veterans' benefit counselor at the nearest Veterans' Administration (VA) regional office or VA hospital listed in the telephone directory under United States Government. If there is no listing in your local area, call the VA nationwide toll-free number, (800) 827-1000. The hearing impaired may call (800) 829-4833. Survivor's benefits are not paid automatically and claims must typically be filed with the VA within two years of a veteran's death. The following are some of the benefits available:

a. VA 21P-530, Burial Benefits. Many law enforcement officers are veterans of the U.S. Armed Forces, and a number of survivor benefits are available to the spouse of a deceased veteran:

(1) Death Pension. This is payable to low-income widows and children of wartime veterans who die of causes not related to their military service.

(2) Funeral Expenses. The VA will pay up to \$300 towards a veteran's funeral expenses, plus \$300 for interment or burial plot.

(3) American Flag. The flag is available to drape the casket and may be presented to the next-of-kin.

(4) Headstone Markers. These are provided for eligible veterans, consistent with the style utilized at the place of burial.

b. National Service Life Insurance. If covered under this program, the following papers will be required when filing a claim:

- (1) Certified copy of death certificate.
- (2) Certified copy of widow/widower's birth certificate.
- (3) VA Form 29-4125, Claim for One Sum Payment Government Life Insurance, obtainable from the VA.

c. Servicemembers' Group Life Insurance and Veterans' Group Life Insurance . The Servicemembers' Group Life Insurance and Veterans' Group Life Insurance may provide insurance coverage for enrolled members of the uniformed services, ready reservists, National Guard, and Reserve Officer Training Corps. For information, contact your local VA office.

d. Cal-Vet Loans . If the deceased had purchased real property under a Cal-Vet loan, the balance will be paid off after the Department of Veterans Affairs has been informed of the death, provided the deceased had purchased a payable upon death insurance policy. If the deceased has not purchased real property, but did have an established "C" number, the surviving spouse has a right to purchase a home under the Cal-Vet plan. For further information, contact the California Department of Veterans Affairs regional office at (800) 952-5626. Should difficulties be encountered, please contact DRU for further assistance.

e. Veterans of Foreign Wars . Members of Veterans of Foreign Wars (VFW) are provided with a \$1,500 personal accident policy. To file a claim, write to VFW Insurance Department, 406 West 34 Street, Kansas City, MO 64111, or contact via telephone at (800) 626-0027.

10. OTHER INSURANCE .

a. All claims for nondepartmental-related insurance must be initiated by the surviving family.

b. National Guard . Employees who are members of the National Guard may have a \$50,000 life insurance policy that is payable, regardless of whether or not the employee was on active guard status at the time of death. Contact the member's National Guard Unit for assistance.

c. The United States Armed Forces Reserve . Benefits may be available for reserve members. The employee's Reserve Unit should be contacted for assistance.

d. Credit Card Traveler's Insurance . This insurance is active if an employee dies while on a trip that has been financed using a major credit card for airlines, buses,

ships, or rental cars. To confirm the credit card has insurance, contact the associated credit card company at one of the following numbers:

- (1) American Express, (800) 528-4800.
- (2) VISA, (800) 847-2911.
- (3) MasterCard, (800) 627-8372.

11. PERSONAL LIFE INSURANCE.

a. Life insurance companies typically require the following two forms to establish proof of a claim:

- (1) A statement of claim.
- (2) A certified copy of a death certificate or attending physician's statement.

b. The claimant's certificate must be completed by the person legally entitled to receive the proceeds. This person must state in what capacity the claim is being made: named beneficiary, assignee, executor, administrator, guardian, or trustee. The claimant will have to supply the company with the following:

- (1) Policy.
- (2) Full name and address of deceased.
- (3) Decedent's occupation and date last worked.
- (4) Decedent's date and place of birth.
- (5) Date, place, and cause of death.
- (6) Claimant's name, age, address, and social security number.

c. If the deceased was a member of any union, service organization, business association, fraternal organization, automobile club, etc., the group should be contacted for information regarding insurance or other benefits available to their survivors.

d. Contact should be made with the Employee Benefits Unit at (916) 843-3700, or DRU at (916) 843-3130, to determine if the deceased has group life insurance coverage, pension fund contributions, credit union insurance, or other benefits. Carefully check the decedent's insurance coverage to determine if the widow(er) and any dependents are still eligible for benefits.

e. It should be noted that a beneficiary of an insurance policy has several options for receiving the payment: lump sum, life annuity, or periodic payments. Insurance proceeds are not generally taxable nor are they considered income to the beneficiary.

12. SOCIAL SECURITY BENEFITS.

a. Assistance. Information relevant to the nearest social security office may be located in the telephone directory under “Social Security Administration” or “United States Government”, or on their Web site at www.ssa.gov.

b. Applying for Benefits. Before benefits can be paid, a claim must be filed with a social security office. Generally, applying for benefits can be done by telephone, mail, in person, or online. The social security office will describe what documents need to be provided for the type of benefit being claimed.

(1) A portion of social security benefits will be subject to income tax if the following exceeds \$25,000:

- (a) The adjusted gross income plus,
- (b) Tax-exempt interest plus,
- (c) One-half of the social security benefits.

(2) The portion of benefits that is taxable will depend on whether the survivor’s annual income exceeds \$34,000.

(3) If annual income is between \$25,000 and \$34,000, taxes may have to be paid on 50 percent of the social security benefits.

(4) If annual income exceeds \$34,000, up to 85 percent of the social security benefits is subject to income tax.

13. SOCIAL SECURITY SURVIVOR BENEFITS.

a. Monthly survivor benefits are available to the following beneficiaries if the decedent was insured by social security at the time of death (regardless of age):

(1) Surviving spouse, 60 or over; 50 or over, if disabled; or of any age if caring for decedent’s child(ren) (under 16 or disabled) who is entitled to benefits;

(2) Unmarried children under age 18, and those age 18 and over who became disabled before age 22 and remain disabled;

(3) Dependent parents age 62 or older; and

(4) Surviving divorced spouse, either:

(a) At age 60 or over; or 50 or over, if disabled; who was married to the employee for 10 years and who is not eligible for an equal or higher personal benefit.

(b) At any age if caring for a child (under 16 or disabled) who is entitled to benefits on the decedent's record.

b. Each surviving dependent is entitled to a percentage of the decedent's primary insurance allowance (PIA), subject to the family maximum benefit. The PIA is the amount the deceased would have received if they had lived to retire at full retirement age; or, if the decedent had already retired at that age, the amount the decedent was receiving. Please note, benefits of surviving spouses (including those who are disabled or divorced) are reduced if benefits began before full retirement age. Eligibility for a government pension may also affect the benefits.

c. If the surviving spouse remarries before reaching age 60 (or 50, if disabled), they will not be eligible for benefits on the decedent's record unless the subsequent marriage ends. After reaching age 60 (or age 50, if disabled), a surviving spouse or a surviving divorced spouse married to an insured worker for 10 years may remarry without losing entitlement to benefits.

d. Children's benefits are not affected by the remarriage of either parent, even if their stepparent adopts them and contributes to their support. The adoption of a surviving child by any other person will not cause the child's benefits to cease.

e. Children's benefits stop when they marry or reach the age of 18. In addition, if the child is 19 years of age and enrolled in high school, the mother's or father's benefits will also stop.

f. In addition to the monthly benefits survivors receive, the deceased worker's eligible spouse is entitled to a one-time death payment of \$255. If there is no spouse, this payment can be made to a child entitled to survivors' benefits.

g. Social security benefits are based on the earned credits a married couple received while employed. The number of credits needed vary with the type of benefit. For more information or to apply for benefits, call or visit the local social security office. Toll-free, confidential telephone calls may be made from 7 a.m. to 7 p.m., Monday through Friday, at (800) 772-1213.

14. SCHOLARSHIPS.

a. All applications for scholarships must be initiated by the surviving family.

b. Alan Pattee Scholarship Act.

(1) Overview. In 1970, Assembly Bill (AB) 338, known as the Alan Pattee Scholarship Act, amended Section 68120 of the California Education Code. Under this Act, no fees or tuition of any kind shall be required or collected by the University of California Regents or the Trustees of California State University from any surviving child, natural or adopted, of a public safety official in the State of California who is killed in the line of duty.

NOTE: Effective in August 2003, non-California residents who are California survivors may attend a California school at the in-state tuition rate and apply for both the Alan Pattee Scholarship & Law Enforcement Personnel Dependents grant.

NOTE: Effective January 1, 2001, Governor Davis signed AB 1850, which provides surviving spouses the same benefit their (surviving) children receive. This consists of tuition-free education throughout the University of California, Hastings College of Law, and California State University systems.

(2) Application. The Act may apply to other colleges or universities under written agreement. When applying, the student must make the university or college aware of the fact that a surviving child of a law enforcement officer killed in the line of duty is applying and may qualify for tuition-free education under Section 68120 of the California Education Code.

c. California Student Aid Commission.

(1) Overview. The Law Enforcement Personnel Dependents Scholarship Program provides need-based educational grants to dependents and spouses of peace officers who have been killed or totally disabled in the line of duty. Scholarship awards match the amount of any Cal Grant award and range from \$100 to \$11,259 for up to 4 years.

NOTE: This scholarship can be extremely difficult to obtain due to the "based on financial need" clause.

(2) Application. For application and eligibility requirements, contact the California Student Aid Commission, Specialized Programs, at P.O. Box 419029, Rancho Cordova, CA 95741-9021. The Commission can be reached at (888) 224-7268, or by e-mail at specialized@csac.ca.gov.

15. OTHER EDUCATIONAL BENEFITS.

a. Public Safety Officers' Educational Assistance Program. The Public Safety Officers' Educational Assistance (PSOEA) program provides financial assistance for higher education to the spouses and children of public safety officers killed in the line of duty or disabled in the performance of their duties. To obtain a copy of the PSOEA Regulations and Application Form, please contact: Public Safety Officers' Educational Assistance Program, Public Safety Officers' Benefit Program, Bureau of Justice Assistance, 810 Seventh Street NW, Fourth Floor, Washington, D.C. 20531, or call (888) 744-6513, or fax (202) 616-0314.

NOTE: The PSOEA scholarship must be the "last resort." When filling out the application, be sure that all other sources have been applied for, and exhausted, before receiving this benefit.

b. Peace Officers' Research Association of California. Peace Officers' Research Association of California (PORAC) offers a scholarship program for family members of officers killed in the line of duty. For more information, contact the PORAC local chapter, 4010 Truxel Road, Sacramento, CA 95834-3725, or call (800) 937-6722.

c. California Peace Officers' Memorial Foundation. This foundation awards scholarships each year to dependents of California peace officers who were killed in the line of duty. Amounts and duration of scholarships will be determined by the scholarship committee based upon available funds. For applications or information, contact: Ms. Michelle Mendoza, California Peace Officers' Memorial Foundation, 1700 I Street, Suite 100, Sacramento, CA 95811, or via telephone at (916) 443-1797.

d. American Police Hall of Fame and Museum.

(1) College scholarships (\$1,500 per year for four years) are provided to the children of officers killed in the line of duty. For more information contact: American Police Hall of Fame and Museum, 6350 Horizon Drive, Titusville, FL 32780, or via telephone at (321) 264-0911, www.aphf.org/about.html.

e. Concerns of Police Survivors' Scholarship.

(1) Concerns of Police Survivors (C.O.P.S.), Inc., has authorized granting scholarships for undergraduate coursework to surviving children and surviving spouses of law enforcement officers whose deaths have been determined by government agencies to be in the line of duty. The C.O.P.S. scholarships assist survivors in states and areas where educational benefits are not part of the state line of duty death benefits package.

(2) The program offers \$1,500 per semester benefit, not to exceed a maximum of \$12,000 in lifetime benefits. The amount of each award will be determined by available funding. Based on scholastic achievement and lack of state-funded educational benefits, the C.O.P.S. Scholarship Committee will determine the recipients of the scholarships. Application forms can be secured by calling C.O.P.S. at (573) 346-4911.

(3) These grants will be made payable to the institution of higher learning. The grant can be used for tuition, registration fees, and/or books. Any unused portions of the grant will be returned to C.O.P.S., Inc., at the end of the school term.

NOTE: The C.O.P.S. scholarship is not usually available to survivors from California; however, there may be special circumstances where survivors may be eligible (i.e., if a survivor moves to another state and cannot use the state education benefit).

f. National Fraternal Order of Police. The National Fraternal Order of Police Scholarship is also known as the Steve Young Memorial Scholarship. It was created through a partnership between the United States Department of Labor and the Fraternal Order of Police (FOP) as a means of assisting spouses of police officers killed in the line of duty between January 1, 2001, and the present, to obtain the skills necessary to successfully support themselves and their children after the loss of a spouse. Award amounts may be reduced by the amount of other awards/benefits the spouse receives. For more information, contact Bill Fitzpatrick, Project Director, via mail at FOP Legislative Office, 309 Massachusetts Avenue, Washington, D.C. 20002, via e-mail at scholarship@fop.net, via telephone at (202) 547-8187, or via fax at (202) 549-8190.

g. TASER Foundation. The TASER Foundation and American Public University System believe in supporting the families of fallen law enforcement officers in the U.S. and Canada by providing this online-based education opportunity to any immediate family member of a TASER Foundation grantee. The Living Legacy Scholarship, offered through the TASER Foundation, offers four full scholarships to American Public University System undergraduate or graduate degree programs. An undergraduate or graduate degree scholarship includes tuition and textbooks. The TASER Foundation can be contacted via telephone at (408) 905-2090.

h. Vantagepoint Public Employee Memorial Scholarship Fund. The International City Management Association Retirement Corporation established the Vantagepoint Public Employee Memorial Scholarship Fund to assist children and spouses of deceased public employees who died in the line of duty who plan to continue education in college or vocational school programs. Scholarships are offered each year for full-time study at an accredited institution of the student's

choice. Awards are for vocational, undergraduate, and graduate study. Interested students must mail a completed application, including a current, complete official transcript, to Scholarship America. Application packages shall be postmarked no later than March 31 of each year. For more information on this scholarship, contact Vantagepoint Public Employee Memorial Scholarship Fund, via mail Scholarship Management Services, Scholarship America, One Scholarship Way, Saint Peter, MN 56082, or via telephone at (507) 931-1682, or toll free at (800) 537-4180.

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ANNEX A

CLAIM FOR DEATH BENEFITS

Approved OMB No. 1121-0024 (Expires: 04/30/2007)

U.S. DEPARTMENT OF JUSTICE OFFICE OF JUSTICE PROGRAMS BUREAU OF JUSTICE ASSISTANCE PUBLIC SAFETY OFFICERS BENEFITS PROGRAM WASHINGTON, D.C. 20531 CLAIM FOR DEATH BENEFITS		FOR DOJ USE ONLY CASE NUMBER _____ DATE RECEIVED _____	
This form should be filed by a surviving spouse, child/children, insurance beneficiary and/or parent(s) of the deceased public safety officer. This claim may be prepared by someone on behalf of these individuals. If you are filing on behalf of others, you must attach evidence of your authority to do so. PLEASE PRINT PLAINLY OR TYPE			
1. NAME OF OFFICER (Last, First, Middle) JOHNSON, GEORGE MICHAEL		2. OFFICER'S TITLE OFFICER	
3. SOCIAL SECURITY NUMBER 123-45-6789	4. DATE OF INJURY 02-29-2008	5. DATE OF DEATH 02-29-2008	
6. NAME AND PHYSICAL ADDRESS OF EMPLOYING AGENCY, ORGANIZATION OR UNIT IN WHOSE SERVICE DEATH OCCURRED (Include zip code) CALIFORNIA HIGHWAY PATROL 4040 BUCK OWENS BLVD. BAKERSFIELD, CA 93308			
INSTRUCTIONS: To ensure payment to all eligible individuals, attach valid documentation (such as notarized, certified, or attested to documentation) regarding marriage, divorce, separation decrees, death certificates, birth certificates, adoption papers, custody agreements, or other evidence of parent-child relationship, as appropriate for any claimant in Parts I and II			
PART I INFORMATION ON SURVIVING BENEFICIARY		If at the time of an officer's death the officer was survived by a husband, wife, or parent(s), Part I should be completed. If there are children of the officer, regardless of age or dependency, Part II must be completed. (Attach certified copies of marriage license, all divorce decrees (including custody agreements), or separation agreements as applicable to marital relationship with the officer and certified copies of children's birth certificates.) If the decedent is survived by neither spouse nor eligible child, provide a copy of the officer's most recent life insurance policies. PLEASE NOTE: The decedent's employing agency will be asked to provide departmental insurance policies.	
7. ELIGIBLE BENEFICIARY Spouse <input checked="" type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Other beneficiary <input type="checkbox"/>			
NAME (Last, First, Middle) JOHNSON, MARY ELIZABETH		SOCIAL SECURITY NO. 246-80-1357	
MAILING ADDRESS (Include zip code) 1234 MAIN ST., BAKERSFIELD, CA 93308			
NAME (Last, First, Middle)		SOCIAL SECURITY NO.	
MAILING ADDRESS (Include zip code)			
8. MARITAL STATUS OF OFFICER AT TIME OF DEATH. MARRIED <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> SEPARATED <input type="checkbox"/> OTHER <input type="checkbox"/> DIVORCED <input type="checkbox"/> (Please identify)		9. DO YOU HAVE REASON TO BELIEVE THAT THE OFFICER WAS MARRIED AT ANY TIME TO ANYONE ELSE? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> If yes, please list number of marriages and submit documents to show dissolution of prior marriages, such as death certificates or divorce decrees.	
Attach necessary documentation such as marriage certificates, all divorce decrees and custody agreements, or separation agreements.		9a. List number of times surviving spouse was previously married. 2	
PART II SURVIVING CHILDREN INFORMATION		If the officer was survived by a natural, out-of-wedlock, adopted or posthumous child, or stepchild (or children) at the time of death, complete this part. All surviving children should be listed regardless of age or dependency status at the time of the officer's death. Attach a certified copy of birth certificates, adoption papers, DNA results, or other evidence of parent-child relation, as appropriate.	
11. NAME (Last, First, Middle Initial)	Date of Birth	Social Security No.	If over 18, educational status at the time of parent's death
JOHNSON, JAMES G.	10-22-2004	135-79-0246	Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
Married <input type="checkbox"/> Single <input checked="" type="checkbox"/>			
Address (if different from item 7, above) and Telephone Number		PARENT OR LEGAL GUARDIAN NAME & SOCIAL SECURITY NUMBER	
(559) 555-1234		MARY E. JOHNSON 246-80-1357	

PART II CONTINUED				
11. NAME (Last, First, Middle Initial)	Date of Birth	Social Security No.	If over 18, educational status at the time of parent's death Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> N/A <input type="checkbox"/>	Marital Status regardless of age Married <input type="checkbox"/> Single <input type="checkbox"/>
Address (if different from item 7, above) and Telephone Number		PARENT OR LEGAL GUARDIAN NAME & SOCIAL SECURITY NUMBER		
11. NAME (Last, First, Middle Initial)	Date of Birth	Social Security No.	If over 18, educational status at the time of parent's death Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> N/A <input type="checkbox"/>	Marital Status regardless of age Married <input type="checkbox"/> Single <input type="checkbox"/>
Address (if different from item 7, above) and Telephone Number		PARENT OR LEGAL GUARDIAN NAME & SOCIAL SECURITY NUMBER		
11. NAME (Last, First, Middle Initial)	Date of Birth	Social Security No.	If over 18, educational status at the time of parent's death Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> N/A <input type="checkbox"/>	Marital Status regardless of age Married <input type="checkbox"/> Single <input type="checkbox"/>
Address (if different from item 7, above) and Telephone Number		PARENT OR LEGAL GUARDIAN NAME & SOCIAL SECURITY NUMBER		
Please attach a separate sheet of paper if there are additional children.				
PART III	<p>STATEMENTS AND CLAIM: All claimants are required to complete this Part. The purpose of this claim is to establish survivorship eligibility and assert the rights to benefits under the Omnibus Crime Control and Safe Streets Act of 1968, as amended (42 U.S.C. 3796). The filing of this claim does not constitute a determination by the Department of Justice that benefits will or will not be awarded to the claimant(s).</p> <p>This claim may be prepared by a person acting on behalf of the claimant(s) such as a parent, legally appointed guardian, other legal representatives, or duly designated representatives of the claimant(s). Evidence of authority to represent claimant(s) should be attached.</p>			
<p>A. STATEMENT ON OTHER CLAIMS FILED WITH THE UNITED STATES GOVERNMENT AND/OR THE DISTRICT OF COLUMBIA: Has claim been filed for benefits under (1) Federal Employees Compensation Act, Section 8191 title 5, U.S. Code? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> (2) D.C. Retirement and Disability Act of September 1, 1916, Section 4-622? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p>				
<p>B. STATEMENT OF FINANCIAL NEED: If an immediate financial hardship has been incurred as a result of this death, an interim payment of \$3000 may be made. If you are experiencing an immediate financial hardship, please attach a statement of financial circumstances and need. This statement must include all financial responsibility, all benefits that you are eligible for, and the benefits that you have received to date. If all documents required to complete this claim are received an interim payment may not be necessary.</p>				
<p>This form will be used by the Department of Justice to determine eligibility of a claimant for paying death benefits. The information may be disclosed to Federal, State, and local agencies to verify eligibility for benefits. We must have Social Security Numbers to process payments.</p>				
<p>I certify that the above information is correct and complete to the best of my knowledge. I certify further that I am not aware of any potential claimant for this PSOB death benefit other than those listed above. I know of no facts or circumstances that would render the above-listed persons ineligible for this benefit. I understand that a false or incomplete statement or a failure to fully disclose pertinent information concerning this claim may be grounds for non-payment of benefits or for prosecution for a false statement under 18 U.S.C. § 1001.</p>				
<p>All the information you give will be considered in reviewing the claim and is subject to investigation.</p>				
SIGNATURE OF CLAIMANT OR AUTHORIZED REPRESENTATIVE (If representative, provide claimant's affidavit granting power of attorney)			DATE	
<i>Mary Elizabeth Johnson</i>			4/23/2008	
			E-MAIL (if available)	JandM@comcast.net
Home number (Including Area Code)	Work number (Including Area Code)	Alternate number (Including Area Code)		
(557) 555-1234	N/A	N/A		
<p>Public Reporting Burden Paper Reduction Act Notice. Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and that impose the least possible burden on you to provide us with information. The estimated average time to complete and file this application is 90 minutes per application. If you have comments regarding the accuracy of this claim, or suggestions for making this claim form simpler, you can write to the Public Safety Officers' Benefits Program, Bureau of Justice Assistance, 810 7th Street, NW, Washington, D.C. 20531 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20530.</p>				