LINE OF DUTY DEATH BENEFIT

The Line of Duty Death Benefit under M.G.L. c. 32, §100A is a one-time award in the amount of \$150,000.00 to the family of a firefighter, public prosecutor, police officer or corrections officer who in the performance of his/her duties and as a result of incident, accident or violence, is killed or sustains injuries which are the direct and proximate cause of death.

APPLICATION PROCESS

death.

Please complete the application and submit to the State Retirement Board with all required documentation. Board approval is required for this benefit. Please contact us if you have questions or need assistance completing this application.

Boston Office

One Winter Street, 8th Fl., Boston, MA 02108 8:00 a.m. to 5:00 p.m., Monday through Friday. Phone: 617-367-7770 or 1-800-392-6014 (Mass only) Fax: 617-723-1438

Springfield Office

436 Dwight Street, Room 109A, Springfield, MA 01103 8:00 a.m. to 5:00 p.m., Monday through Friday Phone: 413-730-6135 Fax: 413-730-6139

APPLICATION PROCESS CHECKLIST

_	When submitting application, please include required documents:
	☐ Fully completed application (page 2).
	Copies of the decedent's birth and death certificates.
	 Offical report from the employer along with a certification that the incident occurred in the line of duty.
	Copies of all medical records relating to the injury and death.
	Copy of the decedent's autopsy report, if any.
	☐ If the deceased was previously retired under the provisions of M.G.L. c. 32, or if any survivor has received or applied for death benefits including accidental death benefits or killed in the performance of duty benefits, the applicant must provide the complete records of the retirement board of the retirement system in which the deceased was a member.
	\Box If spouse is the beneficiary - copy of spouse's birth certificate and marriage license.
	Copy of birth certificates and guardianship papers for minor children.
	☐ If parent(s) are the beneficiaries - copies of birth certificates and certification that the parent or parents were at least 50% dependent on decedent in the year prior to



BENEFICIARY CLAIM STATEMENT: M.G.L. c. 32, §100A Line of Duty Death Benefit

As a qualified family member, I hereby claim the one-time award of \$150,000.00 (one hundred fifty thousand dollars) in accordance with the provisions of Massachusetts General Law Chapter 32, Section 100A. Claim is subject to appropriation.

1. MEMBER INFORMATION (required)		
Name of Deceased:			
Date of Death: (MM/DD/YYYY)			
Last Place of Employment:			
2. BENEFICIARY INFORMATION (requ	uired)		
Name:		SS#:	
All Former Names:			
Present Address:			
City:	State:	Zip:	
Home Phone:	Work Phone:		
Deceased member was my:	pouse Parent	Child	
I certify the above is a true statement i			
Signature of Benef	iciary	Date	SE
4. WITNESS SIGNATURE (required - app	olication will NOT be processed without	witness signature)	- RD U.9
☐ I am 21 years of age or older.			B O A
☐ The beneficiary signed this form in	my presence.		Z
☐ All statements made by the benefic	ciary are true and correct to the best	t of my knowledge.	0 1
Printed Name of Witness:		· -	SECT
Witness Signature:		Date:	SH

2.07: Proceedings for Massachusetts Public Safety Employees Line of Duty Death

Benefits Pursuant to M.G.L. c. 32, § IOOA

Proceedings for Massachusetts Public Safety Employees Line of Duty Death Benefits may be initiated by filing an application with the Retirement Board. The application shall consist of forms prescribed by the Board, and shall be considered filed as of the date upon which the applicant completes and submits all the required forms to the Board.

(1) Required Forms

The eligible survivor(s) in the family of a firefighter, police officer or corrections officer who is killed or sustains injuries in the line of duty which are the direct and proximate cause of his death under circumstances described in M.G.L c. 32, § IOOA may file an application for a one-time award in the amount of \$150,000 by completing and filing with the Board a form entitled Line of Duty Death Benefit Chapter 32 §100A Beneficiary Claim Statement.

(2) Other Required Documentation

Each such applicant must also file the following documentation with the Board:

- a. Copies of any official reports and records describing circumstances and cause of death.
- b. Copy of the Death Certificate.
- c. Copies of medical records relating to the injury and death.
- d. Copy of the decedent's autopsy report, if an autopsy was performed.
- e. If the deceased was previously retired under the provisions of M.G.L. c. 32, or if any survivor has received or applied for death benefits under said chapter, the applicant must provide the complete records of the applicable proceedings before the retirement board of the retirement system in which the deceased was a member.
- f. If the applicant is the spouse of the decedent, a copy of the applicant's birth certificate and a copy of the applicant's marriage certificate.
- g. If the applicant(s) are the child(ren) of the decedent, copies of the birth certificates, and guardianship papers for minor children.
- h. If the applicant(s) is/are the parent(s) of the deceased, a copy of the decedent's birth certificate; copies of the parents' birth certificates; and such documentation as the Board may require as proof to show that said parent(s) was/were at least 50% financially dependent upon the deceased in the year prior to the death.

(3) Investigation, Hearing and Notice

- a. Investigation. In order to reach a decision, the Board may conduct such investigation and require such other documentation as may be necessary to determine the facts. The Board may engage a medical expert of its choice to render an opinion to the Board as to medical aspects of any application, and shall provide a copy of such opinion to the applicant.
- b. Hearing. The Retirement Board may hold a hearing on the application. If a hearing is held; the Board shall give all parties 30 days notice of the time and place for the hearing.

(4) Decision

The decision of the Retirement Board shall be based on the record of the hearing or, if there is no hearing, on the record of the proceedings. A written decision shall be made and copies of the decision shall be sent to all parties.

(5) Payment of Award: Payments subject to Appropriation by Legislature.

The award of the death benefit shall be in the form of a lump sum payment of \$150,000 payable to the prevailing applicant. Such payment of award is subject, however, to appropriation by the Legislature.