

Retiree Casualty Assistance Checklist

As-of date _____

Retiree's Name _____

SSN _____

Military Grade/Rank _____ Date of Retirement _____

Branch of Service _____ Years of Service _____

Address _____

City _____ State _____ ZIP _____

DOB _____ Place of Birth _____

Spouse's Maiden Name _____

Date of Marriage _____ Place of Marriage _____

Father's Name _____

DOB _____ Place of Birth _____

Mother's Maiden Name _____

DOB _____ Place of Birth _____

Documents needed to claim death benefits (Check them off and note location of each)

Copies of report(s) of separation from active duty (DD Form 214, etc.)

Location:

Copies of Retirement Orders

Location:

Copies of Birth and Death Certificates

Location:

Beneficiaries' birth certificate(s) and marriage and/or divorce data

Location:

Social Security data (see Part III)

Location:

VA insurance data (See Part I)

Location:

You should always have the following on hand (note location of each):
(Use separate sheet of paper and attach, if necessary.)

___ Updated will and letter of instructions

Location:

___ Names of banks, credit unions, etc. (account numbers)

Location:

___ Updated list of assets and liabilities

Location:

Insurance policies, numbers, instructions, payments, etc.

Location:

Adoption or naturalization papers (if applicable)

Location:

Part 1 - Veterans Affairs Data (if applicable)

VA Compensation \$ _____ Disability Claim No. _____

Remarks

VA Insurance Policy No. _____ File No. _____

Type _____ Amount \$ _____ / _____

Location of policies _____

Any known paid-up additional VA Insurance \$ _____ Date _____

Veteran's Claim Nos. (other)

Patients Data Card No. (if applicable)

Other Remarks:

Part II - Retirement Pay Data (see retiree account statements)

Retiree pay data: (as-of date) _____

Gross pay \$ _____

Deduction \$ _____

For _____

Deduction \$ _____

For _____

Deduction \$ _____

For _____

Deduction \$ _____

For _____

Net Pay \$ _____ Taxable Income \$ _____

Survivor Coverage Information

Survivor Benefit Plan annuity \$ _____ SBP Base Amount _____

Supplemental SBP (if any) \$ _____ Effective _____

RSFPP annuity \$ _____

Part III - Social Security (when applicable)

Social Security Claim No. _____ Month filed _____

(No payment is payable for the month of death; call local SSA office for more details)

Type of benefit(s) _____ Beginning month of entitlement _____

Amount monthly \$ _____

Bank/Account. No. (Direct deposit) _____

Part IV - Miscellaneous (Things to know and plan for upon death of a retiree)

___ Disposition instructions for the body (burial, cremation, memorial service, etc.)

___ Information required for Death Certification:

 Date/Place of birth, Father's Name, Mother's Maiden Name, etc.

___ Information required for obituary notice:

 Names, relationships and locations of appropriate relatives, etc.

___ Widows will need a new ID card for military, medical, commissary, BX, etc.

___ Necessary changes in your DEERS program will have to be made (Tricare, etc.).

___ It may take several months to clear estates. You may require at least 8 copies of Death Certificate.

___ Contents of your safety deposit box should be known. Make sure the box number, its location and location of key are known.

___ Direct deposit of Social Security benefits and military retirement payments (entitlements) must be immediately changed.

___ Named beneficiaries on insurance policies become very important (keep current).

___ There may be some entitlement to burial benefits for headstone, payments, etc. Check with VA.

___ Check with VA for Presidential Memorial Certificate.

___ An American flag can be obtained. Check VA and Post Office.

___ The survivor should update appropriate will.

___ Extra credit cards should be destroyed or canceled.

___ Appropriate changes should be made to all joint ownerships.

___ Contact insurance companies as appropriate.

___ Be prepared to turn in retiree's ID Card where and when required.

Note: Make every effort to retain "original" documents (Provide certified copies whenever possible)

Fill in and keep the following office phone numbers (Update periodically):

Casualty Assistance: 877-353-6807 Retiree Activities: _____

Hospital (Military): _____ Legal Office (Military): _____

Airmen and Family Readiness Center: _____

VA Hotline: 800-827-1000 Social Security Hotline: 800-772-1213

Finance -- Casualty Reporting: 800-321-1080

Finance -- Retiree Pay: 800-321-1080

SBP – 800-321-1080

ID Card/DEERS Renewal -- 800-334-4162 (Calif.); 800-527-5602 (Alaska and Hawaii);
800-538-9552 (all other states).

Note: Spouse/next of kin should have a copy of this document or know where to locate it. Consider letting a third party (family member) know where it is in case something should happen to both the retiree and spouse or next of kin at the same time.

(This checklist is based on a submission courtesy of Air Force retired Senior Master Sgt. H.K. "Hal" O'Leary of Grants Pass, Oregon.)