

DRAFT FORMAT FOR LETTER TO LONG-TERM CLAIMANT

(Suggest using installation letterhead)

Mr. XYZ  
1234 His Street  
His Town, State, ZIP

Dear Mr. XYZ:

My name is \_\_\_\_\_ and I am the Compensation Specialist at \_\_\_\_\_.  
(installation)

Your name is on my list of former employees receiving Workers' Compensation through \_\_\_\_\_. (installation) Even though it has been a number of years since you worked for the Department of the Army, we still consider you one of us and are concerned about you. We would like to know more about your situation and if there is anything that we can do to assist you.

Please complete the enclosed form letter and add anything that you would like for us to know. If necessary, I will follow up. I have enclosed a stamped, addressed envelope for your convenience.

With best wishes,

Your name

Name of employee \_\_\_\_\_

Current address \_\_\_\_\_

Current phone number \_\_\_\_\_

Please check one:

I am doing all right and don't have any additional needs

I have needs related to my Workers' Compensation claim that I would like to discuss with you.

Additional information I would like to share:

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Employee's signature

*Please mail this to your Compensation Specialist in the envelope enclosed.*

*Thank you.*