

Due to the sensitive nature of the information in this document, please keep this in a secure location, known only by someone you trust.

Name: _____

Date: _____

Brochure Intended for MoDOT and Highway Patrol Members

Record of Important Documents

Compliments of the MoDOT and Patrol Employees' Retirement System



Personal Documents

Indicate where each of the following personal documents are stored.

Birth Certificate _____

Marriage Certificate _____

Passport _____

Divorce Papers _____

House Deed _____

Social Security Card _____

Life Insurance Policies _____

Homeowners Policy _____

Car Title _____

Military Discharge _____

Will _____

Living Will _____

Trust _____

Power of Attorney _____

List other important documents below and where they are stored.

Sources of Income

What are the sources of your monthly income? Which income provider needs to be contacted when you die? Are there continuing survivor benefits for your spouse or beneficiary? Mark all that apply.

- State Retirement Benefit (MPERS) Call (800) 270-1271
- Missouri Deferred Compensation Plan Call (800) 392-0925
- Social Security Call (800) 772-1213
- The Standard (disability insurance) Call (800) 368-1135

Other Income (e.g., pension, savings, certificates of deposit, mutual funds, IRAs, stocks/bonds, etc)

Consider keeping any Annual Benefit Statements you receive, in one place, with this brochure.

Insurance

Provide the name, address, phone, and policy number for each of the following policies.

Life Insurance

Company _____

Address _____

Phone _____

Policy # _____

Health Insurance

Company _____

Address _____

Phone _____

Policy # _____

Home Insurance

Company _____

Address _____

Phone _____

Policy # _____

Automobile Insurance

Company _____

Address _____

Phone _____

Policy # _____

Insurance Type _____

Company _____

Address _____

Phone _____

Policy # _____

Insurance Type _____

Company _____

Address _____

Phone _____

Policy # _____

Insurance Type _____

Company _____

Address _____

Phone _____

Policy # _____

Insurance Type _____

Company _____

Address _____

Phone _____

Policy # _____

Bank/Financial Institutions

Indicate the name of the bank/financial institution, address, phone, and account number for each of the following:

Checking Account

Bank Name _____

Address _____

Phone _____

Account # _____

Savings Account

Bank Name _____

Address _____

Phone _____

Account # _____

Mortgage

Bank Name _____

Address _____

Phone _____

Account # _____

Automobile Loan

Bank Name _____

Address _____

Phone _____

Account # _____

Safe Deposit Box

Bank Name _____

Address _____

Phone _____

Box # _____

Location of Key _____

Other

Bank Name _____

Address _____

Phone _____

Account # _____

Other

Bank Name _____

Address _____

Phone _____

Account # _____

Other

Bank Name _____

Address _____

Phone _____

Account # _____

Checklist for Spouse/Beneficiary

Contact Information can be found on the back cover of this brochure.

The following checklist is provided as a convenience for your spouse/beneficiary after your death. ***This is only a guide.*** All items listed may ***not*** apply, and there may be other items that need to be added.

- Retirement Benefit (through MPERS) Contact MPERS
 - Regardless of your date of death, you are entitled to that month's full benefit payment.
 - Your benefit payment will go directly into your bank account as long as the account remains open. If the account is closed, MPERS will issue your final benefit payment to your designated beneficiary or as allowed by law.
 - A benefit specialist will inform the contact person if anyone is eligible for survivor benefits or the \$5,000 death benefit and how to apply.

- Other Monthly Income Payments See ***Sources of Income*** Section
 - Ask if survivor benefits are available and what happens to the payment made after date of death.

- Social Security Benefit..... Contact Social Security

- Life Insurance (as state employee/retiree) Contact Your Local District/Troop Human Resources

- Other Life Insurance See ***Insurance*** Section

- Medical Insurance (as state employee/retiree)..... Contact MoDOT/MSHP Employee Benefits
 - Ask if dependent coverage is available and how to apply (if applicable).

- Dental/Vision Insurance (through MCHCP)..... Contact Missouri Consolidated Health Care Plan
 - Ask if dependent coverage is available and how to apply (if applicable)

- Deferred Compensation (as state employee/retiree).... Contact the State of Missouri Deferred Compensation Plan

- Bank Account(s) See ***Bank/Financial Institutions*** Section
 - Determine if there will be any scheduled deposits made into the account before closing it. MPERS issues benefit payments the last working day of each month. Closing the account too soon could impact the payment of your final benefit.

- Other _____

- Other _____

- Other _____

Personal Access

Do you have any usernames, passwords, or safe combinations that your spouse/beneficiary will need to know after your death? Make sure your spouse/beneficiary knows where to find this information. Consider contacting the company to give your spouse/beneficiary authorization to access your information.

Professional Service Contacts

Indicate the name and phone number of those individuals that provide you with professional services.

Attorney

Name _____

Phone # _____

Accountant

Name _____

Phone # _____

Financial Planner

Name _____

Phone # _____

Other Service _____

Name _____

Phone # _____

Other Service _____

Name _____

Phone # _____

Miscellaneous Information/Notes

Contact Information

With so many benefit providers, it can be confusing to determine who to contact with questions. Below is a list of benefit providers and the benefits they administer. For your convenience, space has been added so you can list other important contact information.

Type of Benefit	Who to Contact
<p>Retirement/Survivor Benefits Disability Benefits \$5,000 Death Benefit</p> 	<p>MoDOT & Patrol Employees' Retirement System (MPERS) Mail: PO Box 1930 • Jefferson City, MO 65102-1930 Office: 1913 William St. • Jefferson City, MO 65109 Phone: (573) 298-6080 • Toll Free: (800) 270-1271 Fax: (573) 522-6111 • Website: www.mpers.org</p>
<p>Medical Insurance Life Insurance</p>  	<p>MoDOT/MSHP Employee Benefits Mail: PO Box 270 • Jefferson City, MO 65102-0270 Office: 105 W. Capitol Ave. • Jefferson City, MO 65109 Phone: (877) 863-9406 Website: www.modot.mo.gov/newsandinfo/benefits.htm</p>
<p>Dental/Vision Coverage</p> 	<p>Missouri Consolidated Health Care Plan (MCHCP) Mail: PO Box 104355 • Jefferson City, MO 65110-4355 Office: 832 Weathered Rock Court • Jefferson City, MO 65101 Phone: (573) 751-8881 • Toll Free: (800) 487-0771 Website: www.mchcp.org</p>
<p>Deferred Compensation</p> 	<p>State of Missouri Deferred Compensation Plan Office: 3349 American Avenue, Suite A • Jefferson City, MO 65109 Phone: (573) 893-1053 • Toll Free: (800) 392-0925 Website: modeferredcomp.org</p>
<p>Social Security</p> 	<p>Toll Free: (800) 772-1213 • Website: www.ssa.gov</p> <p>Local Phone # _____</p> <p>Local Office _____</p> <p>_____</p>
<p>The Standard Disability Insurance</p> 	<p>The Standard Insurance Company Mail: PO Box 2800 • Portland, OR 97208-2800 Toll Free: (800) 368-1135 Website: www.standard.com</p>
<p>Other Benefit Contacts</p> <p>_____</p> <p>_____</p>	<p>Address _____</p> <p>_____</p> <p>Phone _____</p> <p>_____</p>