

United States Office of Personnel Management Retirement Operations Boyers, PA 16017

Request for Case Review for Enhanced Disability Annuity Benefit

Your full name			
If yo	ou are receiving a survivor annuity, full nam		
Clai	m number (beginning with CSA or CSF)		
Your daytime telephone number		Your email address	
My annuity benefit includes credit for service performed under the Civil Service Retirement System (CSRS) or the Federal Employees' Retirement System (FERS) as: (check all that are appropriate)			
	Law Enforcement Officer		
	Firefighter		
Nuclear Materials Courier performed with the Department of Energy on or after October 1, 1977			
Customs and Border Protection Officer on or after July 6, 2008			
Member of the Capitol Police			
Member of the Supreme Court Police			
Congressional Employee			
Member of Congress			
Air Traffic Controller			
We will respond to your request in writing to your address of record.			

Retirement Operations

Public Burden Statement

We estimate providing this information takes an average 5 minutes per response, including the time for reviewing instructions, getting the needed data, and reviewing the requested information. Send comments regarding our estimate or any other aspect of this form, including suggestions for reducing completion time, to the U.S. Office of Personnel Management, Retirement Services Publications Team, (3206-0254), Washington, D.C. 20415-3430. The OMB number, 3206-0254, is currently valid. OPM may not collect this information, and you are not required to respond, unless this number is displayed.