

Questionnaire:

OBA Email Survey of Benefit Determination Letter and Statement

Survey of LR Nelson Deferred Vested Participants

The Pension Benefit Guaranty Corporation (PBGC) recently sent you a benefit determination letter and statement to inform you about your PBGC pension benefit. To help us improve our communications, please take a few moments to complete this seven-question survey about the clarity of our communications in the letter and statement. If you have questions concerning this survey, please email internalsurvey@pbgc.gov.

Paperwork Reduction Act Notice: The Office of Management and Budget (OMB) has approved this survey under OMB Control Number 1212-0066 (expires 10/31/2017). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Your participation is voluntary and the survey should take about 5 minutes to complete.

Confidentiality: Your responses will be used by PBGC solely for customer service improvement and will be treated with the confidentiality provided by the Privacy Act and the Freedom of Information Act. Therefore, we ask that you do not include your name, Social Security Number, PBGC Customer ID, or any other identifying information with your responses. You will not be asked any specific questions about your identity or benefit. Your responses to this survey will not affect any dealings you may have with PBGC.

If you need assistance with your PBGC benefit or any other PBGC matter, please call our Customer Contact Center at 800-400-7242.

Survey Instructions: Use the "Next" button to advance through the survey. Use the "Previous" button to review the survey questions and your responses. Once you have completed the survey, select the "Finish" button on the last page to submit your responses. Please remember to submit your survey so that we can use your valuable feedback.

The following questions refer to the letter accompanying your benefit determination statement:

Q1. Is the letter written in clear English?

- Yes**
- In Part**
- No**

Q2. Does the letter contain any words or terms that you do not understand?

- Yes**
- No**

Q2a. Which words did you not understand?

Q3. Does the letter make it clear that you should contact PBGC four months before you want to start receiving your benefit?

- Yes**
- No**

Q4. Does the letter make it clear that you have 45 days from the date of the letter to appeal your benefit?

- Yes**
- No**

The following questions refer to the benefit determination statement you received:

Q5. Did you review your personal information on the benefit determination statement to verify that it is correct?

Yes

No

Q6. After reading the benefit determination statement, do you understand:

	Yes	No
When you can start receiving your benefit?	<input type="radio"/>	<input type="radio"/>
What your monthly payment amount will be?	<input type="radio"/>	<input type="radio"/>

Q7. Please provide any comments or suggestions you believe will help improve the letter or the benefit determination statement.

Select the "Previous" button to review your responses or select the "Finish" button to submit your survey.