A copy of this memorandum of information will be furnished to each officer and enlisted man separated from service in The United States Army.

Information Relative to Compensation and Continuance of War Risk Insurance

FURNISHED TO

Webbink Fritz, A 3797979
(Surname) (Christian name) (Army serial No.)

WAR RISK INSURANCE.

All correspondence relating to War Risk Insurance should be addressed to "Bureau of War Risk Insurance, Treasury Department, Washington, D. C.," and always contain the following information:

Your first name, middle name, and last name, in full.

Your grade and organization at the time of applying for insurance.

Your Army serial number.

Date of your discharge or separation from service. Your present address.

- 1. If you desire to continue your War Risk Insurance it will be necessary for you to make payments of the monthly premiums directly to the Disbursing Clerk, Bureau of War Risk Insurance, Treasury Department, Washington, D. C. Check or money order should be made payable to the Treasurer of the United States.
- 2. Your premium on \$_____10.000_____ insurance will be \$____6.80_ per month until July 1, 1919, after which date it will be as follows:

From July 1, 1919, to July 1, 1920, \$____6.90 per month.

From July 1, 1923, to July 1, 1924, \$____7.20_ per month.

- 3. Should your address or that of a beneficiary change at any time you should advise the Bureau of War Risk Insurance, Treasury Department, Washington, D. C., immediately.
- 4. Within five years after the termination of the war, as declared by proclamation of the President, you must apply to the Bureau of War Risk Insurance, Treasury Department, Washington, D. C., for the conversion of your present policy into some other form of insurance. Your present policy will lapse unless converted within that time.
- 5. You may change your beneficiary at any time provided the new beneficiary is within the permitted class. Those who may be designated are: A spouse, child, grandchild, parent, brother, or sister.

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COMPENSATION.

All correspondence relating to compensation should be addressed to "Compensation Section, Bureau of War Risk Insurance, Treasury Department, Washington, D. C.," and always contain the following information:

Your first name, middle name, and last name, in full. Your grade and organization at time of discharge. Your Army serial number.

The date of your discharge or separation from the service.

Your present address.

- 1. The United States will pay compensation for death or disability resulting from injury suffered or disease contracted in the line of duty by an officer or enlisted man when employed in active service, except where injury or disease has been caused by his own willful misconduct. Furthermore, dismissal or dishonorable discharge from the service terminates all rights to any compensation.
- all rights to any compensation.

 2. In case a man should discover after and within one year after separation from the service that he has sustained an injury or contracted disease in the line of duty when employed in active service which may result in disability or death, but which did not disable him and of which he had no knowledge at the time of separation from the service, he should communicate the fact immediately to the Compensation Section of the Bureau of War Risk Insurance, giving his full name, Army serial number if an enlisted man, rank or grade, and organization; the date of his discharge or separation from the service; and, if possible, the date of his injury or disability. He should at the same time request to be furnished a certificate to the fact that at the time of his separation from the service he was suffering from a wound, injury, or disease which is likely to result in death or disability. This certificate must be obtained within one year from the date of separation from the service, and in order to obtain it the man must submit to a medical examination by a physician designated by the Bureau of War Risk Insurance.

 3. No compensation shall be payable for death or disability
- No compensation shall be payable for death or disability which does not occur prior to or within one year from date of separation from the service.
- 4. No compensation is payable for disability unless claim is filed within five years after the date of separation from the service.
- 5. In order to procure compensation for disability the claimant shall submit to examination by a medical officer of the United States. If he refuses to submit to such examination, his right to compensation ceases.

6. Compensation is entirely soparate and distinct from War-Risk Insurance and should not be confused therewith.

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