

WORKERS' COMPENSATION ID CARD



www.compalliance.org

New York State Municipal
Worker's Compensation Alliance
900 Stewart Avenue, Suite 600
Garden City, NY 11530
Tel: (866) 697-6922
Fax: (516) 227-2352

Member Name

Member Since

City of Long Beach

07/01/09

Valid until termination of membership

See reverse side for important information.



Fire Districts of New York Mutual Insurance Co., Inc.
One Blue Hill Plaza - 16th Floor, P.O. Box 1609
Pearl River, NY 10965
Phone: 888-314-3004 - Fax: 845-352-2022
VFBL/Workers' Compensation Claim Card

Volunteer Firefighter

00B

Blood Type

Fire District

Badge #

This is to certify that the Volunteer Firefighter named above of the Fire District listed is insured with the Fire Districts of New York Mutual Insurance Co., Inc. for Volunteer Firefighters Benefits Law

Physicians and Hospitals are required to file C-4 forms with Fire Districts of New York Mutual Insurance Co., Inc. to ensure prompt payment for treatment of an 'In the line of duty Injury'.