

# SAMPLE LETTER EXPLAINED

There are three pages in this package.

1. Explanation Letter
2. Sample Letter
3. PDF Form to be completed, printed, signed and mailed to Treasury's Office of D.C. Pensions.

The **Request for Reconsideration and Claim for Federal Benefits Payment** template is used by everyone who has been notified by Treasury's Office of D.C. Pensions that they will reduce their future monthly pension payments.

This Sample letter is an example of how the **Request for Reconsideration and Claim for Federal Benefits Payment** would appear for a member who was appointed to the District of Columbia Fire and Emergency Medical Services ("DCFEMS") on September 1, 1970 and served until February 28, 1992. He was born on March 1, 1948 and is 67 years old. His pension is his only source of income.

He lists several health issues that he faces, including Cancer, Diabetes and Arthritis. He lists his monthly living expenses for his mortgage, utilities, home maintenance, transportation, food, clothing and various insurance policies.

The figures that appear here are not meant to be copied. They simply provide examples of how the letter may look after you complete it to fit your personal circumstances.

You may designate someone you wish to act as your representative, if you know someone you feel would be able to do that for you.

If you have additional questions, contact William E. Mould at 240-417-0970 or email him at [bmould@strombergmetals.com](mailto:bmould@strombergmetals.com).

To: Department of the Treasury  
Office of D.C. Pensions  
Attn: Employee Relations Team  
1500 Pennsylvania Avenue, N.W.  
Washington, D.C. 20220

**SAMPLE LETTER**

Re: Request for Reconsideration and Claim for Federal Benefits Payment

I am a retired member of the District of Columbia Fire and Emergency Medical Services ("DCFEMS"). I was appointed on September 1, 1907. I retired on February 28, 1992. I am 67 years old; my date of birth is March 1, 1948. My pension is my sole source of income.

On January 27, 2015, I received a letter from ODCP informing me that my pension was going to be reduced in the future due to systemic errors made by the Government years ago. A copy of that letter is enclosed herewith. As a participant and beneficiary of the Police and Firefighters Retirement Plan, I request reconsideration of the ODCP decision and I am filing a continuing claim for the monthly difference between what my pension payment formerly was and the reduced amount I have been informed I will receive in the future. I request that I be provided with a copy of all documents upon which the proposed pension reduction is based.

I am submitting this request for reconsideration and claim because I worked hard and risked my life for my pension and I complied with all laws and regulations to receive my pension and I rely on my pension to meet my normal financial obligations and expenses. I need all of my current pension, not part of it. Whatever mistakes ODCP says were made were not made by me, and I contest the reduction of my pension. I have relied on my pension for many years and it would be a severe financial hardship and against equity and good conscience to not pay me the full pension that I have earned and budgeted for and that I need to meet my expenses. I served the Government for many years and I trusted the Government to do the right thing. Now in my old age the Government says I have to pay for mistakes it says it made. That is not right.

I am 67 years old. I have no other source of income. I have the following health conditions and limitations, Cancer, Diabetes and Severe Arthritis. I need substantially all of my pension payments to meet my current financial obligations and my current and anticipated ordinary and necessary living expenses, which include rent/mortgage payments of \$1,800 per month, utilities of \$450 per month, home maintenance of \$250 per month, transportation costs of \$175 per month, food costs of \$400 per month, clothing costs of \$50 per month, life insurance costs of \$65 per month, health insurance costs of \$775 per month, accident insurance of \$25 per month.

I also object to the waived overpayment being considered as income to me, reportable to the IRS. I did not make this mistake and I should not have to pay for it, either by having the overpayment collected, or by having the waiver of a collection of the overpayment considered as taxable income to me. I request reconsideration of that decision.

Name

Address

*(Any identifying info on the ODCP letter, such as a number)*

*(Date claim letter is sent to ODCP)*

To: Department of the Treasury  
Office of D.C. Pensions  
Attn: Employee Relations Team  
1500 Pennsylvania Avenue, N.W.  
Washington, D.C. 20220

Re: Request for Reconsideration and Claim for Federal Benefits Payment –  
Name of Retiree: \_\_\_\_\_

I am a retired member of the District of Columbia Fire and Emergency Medical Services ("DCFEMS"). I was appointed on \_\_\_\_\_. I retired on \_\_\_\_\_. I am \_\_\_\_\_ years old; my date of birth is \_\_\_\_\_. Is your pension your sole source of income? \_\_\_\_\_(yes or no)

On \_\_\_\_\_ I received a letter from ODCP informing me that my pension was going to be reduced in the future due to systemic errors made by the Government years ago. A copy of that letter is enclosed herewith. As a participant and beneficiary of the Police and Firefighters Retirement Plan, I request reconsideration of the ODCP decision and I am filing a continuing claim for the monthly difference between what my pension payment formerly was and the reduced amount I have been informed I will receive in the future. I request that I be provided with a copy of all documents upon which the proposed pension reduction is based.

I am submitting this request for reconsideration and claim because I worked hard and risked my life for my pension and I complied with all laws and regulations to receive my pension and I rely on my pension to meet my normal financial obligations and expenses. I need all of my current pension, not part of it. Whatever mistakes ODCP says were made were not made by me, and I contest the reduction of my pension. I have relied on my pension for many years and it would be a severe financial hardship and against equity and good conscience to not pay me the full pension that I have earned and budgeted for and that I need to meet my expenses. I served the Government for many years and I trusted the Government to do the right thing. Now in my old age the Government says I have to pay for mistakes it says it made. That is not right.

Additional financial hardships

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I also object to the waived overpayment being considered as income to me, reportable to the IRS. I did not make this mistake and I should not have to pay for it, either by having the overpayment collected, or by having the waiver of a collection of the overpayment considered as taxable income to me. I request reconsideration of that decision.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
(Any identifying info on the ODCP letter, such as a number)

\_\_\_\_\_  
(Date claim letter is sent to ODCP)