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STATE OF MISSOURI
DEPARTMENT OF PUBLIC SAFETY
OFFICE OF THE DIRECTOR

Application for Crime Victims' Compensation Instructions

- 1) If the victim is a minor or an incompetent person, the claimant must be a parent or guardian.
- 2) The application must be signed by the victim (or claimant).
- 3) Along with the application, submit a copy of the following:
 - a. For medical or counseling claims, submit a copy of the medical or counseling bills received from the crime injuries and any paid receipts.
 - b. For funeral claims, submit a copy of the death certificate, a copy of the funeral bill and any paid receipts.
 - i. If life insurance is available, submit the policy information including the beneficiary name and mailing address.
 - c. For lost wages or support, submit a copy of the last three paycheck stubs prior to the crime incident.
 - i. If the victim is (was) self-employed, send a copy of the two state and federal tax returns prior to the crime.
- 4) If health insurance is available, all medical or counseling bills must be submitted to the health insurance carrier first.
- 5) A completed and signed application shall be filed not later than two years after the occurrence of the crime or the discovery of the crime upon which it is based.
- 6) Once the application is received and reviewed, other information or documentation may be required. A letter informing you of the additional requirement will be mailed to you.
- 7) If the additional information is not submitted in a timely manner, the claim may be denied.
- 8) If you move, please send your new address with your signature. If the Crime Victim's Compensation office is unable to locate you by mail, your claim may be denied.

Crime Victims' Compensation • Child Physical Abuse Forensic Examination
Sexual Assault Forensic Examination • Fallen Public Safety Worker Program

RELAY MISSOURI: 1-800-735-2966 (TDD) • 1-800-735-2466 (Voice)