

Fallen Emergency Service Provider Program (FESP)  
The 100 Club of Buffalo, Inc.



**A. POSTHUMOUS AUTHORIZATION:**

In the event a deceased Public Safety Officer (PSO) has not signed an authorization form prior to the time of death any party with the legal capacity to posthumously sign for the PSO may do so below:

I, \_\_\_\_\_, hereby authorize the 100 Club of Buffalo, Inc. (The 100 Club) and  
(YOUR NAME HERE)

its associates to represent, \_\_\_\_\_ in the pursuit of benefits under the  
(NAME OF PSO HERE)

PSOB Act of 1976 as represented to in the above document. I am signing within the capacity of:

\_\_\_\_\_  
(STATE YOUR CAPACITY TO SIGN)

Signed: \_\_\_\_\_

Date \_\_\_\_\_

**B. AUTHORIZATION FOR DISCLOSURE OF INFORMATION:**

I, the undersigned, authorize all the information requested in this form together with any other documentation necessary under the Public Safety Officer's Benefit Act (PSOB) as well as all fire/police incident reports, and medical services patient reports regarding emergency care provided to me by fire, ambulance, medical doctor, and hospital personnel, documenting my condition, procedures applied, autopsies/toxicology reports, and laboratory tests resulting from my line of duty injury and/or death to be released to Arthur F. DuC. Musarra, Esq., and/or his designee. I further authorize Arthur F. DuC. Musarra, Esq., and/or his designee, to act as attorney for the purpose of proceeding in an attempt to receive benefits pursuant to the PSOB Act for the benefit of all individuals who may collect pursuant to the Act.

Please check one:

\_\_\_\_\_ I wish to take advantage of The 100 Club Burial and Funeral Fund \*

\_\_\_\_\_ I do not wish to take advantage of The 100 Club Burial and Funeral Fund

\*Subject to change, this includes free burial services for public safety officers who die in the line of duty. Services shall be arranged through Dengler & Roberts Funeral Homes and a credit toward burial at any of the participating cemeteries, including those at Mount Calvary Cemetery Group, Diocese of Buffalo, Forest Lawn Group and Elmlawn Cemeteries. Benefit subject to limitations as provided by the participating cemeteries or law.

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**C. PSO CONTACT INFORMATION:**

The best way to contact me is via:

- 1) Primary Contact: \_\_\_\_\_  
(name, address, phone number, relationship)
- 2) Union Representative: \_\_\_\_\_  
(name, address, phone number, relationship)
- 3) Other: \_\_\_\_\_  
(name, address, phone number, relationship)

**D. CONSENT FOR RELEASE OF CONTACT INFO:**

Pursuant to 5 USC §552a(b), The Privacy Act, I, the abovenamed, also consent to the release of my name and address to Arthur F. DuC Musarra, Esq., his designee, and the 100 Club of Buffalo Inc.

**E. LEGAL REPRESENTATION AND DECISION TO PURSUE CLAIM:**

The 100 Club of Buffalo, (The 100 Club) F. DuC. Musarra, Esq., or the designee of Arthur F. DuC. Musarra do not enter into any agreement to represent the above signed safety officer through the signing of this document, unless notified of such representation by The 100 Club Arthur F. DuC. Musarra, or his designee. All representation is done on a voluntary basis in the sole discretion of the 100 Club or Arthur F. DuC. Musarra, Esq., or his designee.

Any agreement to enter into said representation must be made in writing only after The 100 Club and Arthur F. DuC. Musarra Esq., or his designee, have had an opportunity to review the public safety officer's case and have agreed to accept the case. The decision by any of these parties not to pursue the Public Safety Officer's claim does not preclude the signer of this document from otherwise pursuing their claim under the PSOB Act.

This offer of representation is done in conjunction with The One Hundred Club of Buffalo, Inc. (The 100 Club). All services are provided pro bono for the benefit of the PSO's survivors regarding preparation of PSOB claims. I understand that there will be no charge for the services herein performed and therefore I, or my representatives, will make no claim against The 100 Club or Arthur F. DuC. Musarra, Esq., and/or his designee. In the event The 100 Club or Arthur F. DuC. Musarra, Esq., or his designee, decide not to pursue this matter, such notice will be delivered orally by that attorney or his representative; which includes but is not limited to a director of The 100 Club, or sent by regular mail in writing to my representatives. Any act that the public safety officer created, which is released to authorities pursuant to government regulations or statutes, that defeats any claim of the undersigned shall create no action against The 100 Club or Arthur F. DuC. Musarra, Esq. or his assigns.

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**F. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)**

By signing this section F, the undersigned, hereby authorizes Arthur F. DuC. Musarra and The 100 Club of Buffalo, Inc. (The 100 Club) receive any medical document Arthur F. DuC. Musarra, his assigns, or The 100 Club deem necessary to pursue any and all claims arising under the PSOB Act.

\_\_\_\_\_  
(SIGNATURE HERE) \_\_\_\_\_ Date

**G. SIGNATURE & NOTARY**

By signing below the undersigned indicates he/she has read the above information in all the above sections, A through F, and agrees to all terms and conditions set out therein:

\_\_\_\_\_  
(PRINT NAME HERE)

\_\_\_\_\_  
(SIGNATURE HERE) \_\_\_\_\_ Date

Department or Company \_\_\_\_\_ Date \_\_\_\_\_

Please have the following filled out by a notary public at the time of signing:

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public \_\_\_\_\_ Notary Seal

**H. ADDITIONAL INFORMATION ON FESP AND PSOB BENEFITS**

More Information on the 100 Club of Buffalo's Fallen Emergency Service Provider program can be found at <http://www.100clubbuffalo.org/fesp.html>.

More information on the Department of Justice's PSOB Death Benefits Program can be found at <http://www.benefits.gov/benefits/benefit-details/1073>

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