

Date: _____ Policy #: _____

To: _____ Fax #: _____

From: _____ Fax #: _____

Number pages (including cover): _____ Phone#: _____

Subject: DFSP-4 Annual Report supplemental information

Please fax the required documents to the nearest customer service office listed below. Direct any questions regarding this submission to your BWC account representative. You can reach him or her by calling the appropriate customer service office.

Check list of required documents for submission to BWC in addition to your submitted online report.

- Copy of written DFSP policy if not previously submitted
- Invoice for employee education
- Sign-in sheet for employee education
- Invoice for supervisor training
- Sign-in sheet for supervisor training
- Invoice for collection/testing
- Invoice from consortium (if one was used) and letter on consortium letterhead that states employer is member of a consortium and that employees are in a pool that draws at 5 percent or higher IF consortium is used to meet random drug-testing requirement on the state construction project.
- Explanation for any "No" responses in completing the Annual Report

Customer Service Office	Fax Number	Phone Number	Customer Service Office	Fax Number	Phone Number
Cambridge	877-621-9451	740-435-4210	Governor's Hill	866-570-9421	513-583-4403
Cantbn	877-721-9420	330-471-0937	Lima	888-621-1299	419-227-4116
Cleveland	888-621-3407	216-787-3060	Mansfield	888-621-1448	419-529-4528
Columbus	614-621-9449	614-728-6457	Portsmouth	877-292-6371	740-353-3419
Daybn	614-621-3029	937-264-5217	Toledo	877-621-1325	419-245-2474
			Youngstown	866-292-1020	330-797-5010

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Urgent For review Please comment Please Reply