



# CONTACTS

TOWNSHIP OFFICIALS OF ILLINOIS RISK MANAGEMENT ASSOCIATION

## CLAIM REPORTING HOTLINE

**(844) 562-2720** | Available 24/7 | [toirma.org/claims-management](http://toirma.org/claims-management)

ADMINISTRATION	CUSTOMER SERVICE	CLAIMS	LOSS CONTROL
<p><b>Jim Donelan</b> <i>Executive Director</i> (217) 744-8010 Phone (217) 744-8011 Fax <a href="mailto:jdonelan@toirma.org">jdonelan@toirma.org</a></p>	<p><b>Maritza Simon</b> <i>Underwriting Tech</i> (217) 444-1204 Phone (217) 477-6604 Fax <a href="mailto:maritza.simon@ccmsi.com">maritza.simon@ccmsi.com</a></p>	<p><b>Sarah Warfield</b> <i>Claim Associate</i> (217) 444-1263 Phone (217) 477-5985 Fax <a href="mailto:sarah.warfield@ccmsi.com">sarah.warfield@ccmsi.com</a></p>	<p><b>Lisa Menner</b> <i>Claim Consultant</i> (217) 444-1372 Phone (217) 477-6490 Fax <a href="mailto:lisa.menner@ccmsi.com">lisa.menner@ccmsi.com</a></p>
<p><b>Matt Knight</b> <i>Associate Director</i> (217) 744-8010 Phone (217) 744-8011 Fax <a href="mailto:mknight@toirma.org">mknight@toirma.org</a></p>	<p><b>Carla Hilligoss</b> <i>Underwriter</i> (217) 444-2111 Phone (217) 444-2779 Fax <a href="mailto:chilligoss@ccmsi.com">chilligoss@ccmsi.com</a></p>	<p><b>Jacquitta Johnson</b> <i>Claim Representative</i> (217) 444-1313 Phone (217) 477-7227 Fax <a href="mailto:jacquitta.johnson@ccmsi.com">jacquitta.johnson@ccmsi.com</a></p>	<p><b>Kim Rosdail</b> <i>Claim Consultant</i> (217) 444-2165 Phone (217) 477-7432 Fax <a href="mailto:krosdail@ccmsi.com">krosdail@ccmsi.com</a></p>
<p><b>Katie Musgrave</b> <i>Account Manager</i> (217) 444-1349 Phone (217) 477-6649 Fax <a href="mailto:kmusgrave@ccmsi.com">kmusgrave@ccmsi.com</a></p>	<p><b>Ashley Bell</b> <i>Data Entry Coordinator</i> (217) 444-2186 Phone (217) 477-7417 Fax <a href="mailto:abell@ccmsi.com">abell@ccmsi.com</a></p>	<p><b>Bailey Ellison</b> <i>Claim Representative</i> (217) 444-1418 Phone (217) 477-3038 Fax <a href="mailto:bellison@ccmsi.com">bellison@ccmsi.com</a></p>	<p><b>Julie Flynn</b> <i>Claim Supervisor</i> (217) 444-1245 Phone (217) 477-6645 Fax <a href="mailto:jflynn@ccmsi.com">jflynn@ccmsi.com</a></p>
<p><b>Mickey Goral</b> <i>Member Services Associate</i> (217) 744-8010 Phone (217) 744-8011 Fax <a href="mailto:mgoral@toirma.org">mgoral@toirma.org</a></p>	<p><b>Beth Eyrich</b> <i>Underwriting Supervisor</i> (217) 444-1139 Phone (217) 477-6739 Fax <a href="mailto:beyrich@ccmsi.com">beyrich@ccmsi.com</a></p>	<p><b>Jessica Stitt</b> <i>Claim Representative</i> (217) 444-1191 Phone (217) 477-6691 Fax <a href="mailto:jstitt@ccmsi.com">jstitt@ccmsi.com</a></p>	<p><b>Sean Richardson</b> <i>Loss Control Supervisor</i> (217) 274-1907 Mobile (217) 444-1384 Phone (217) 477-6884 Fax <a href="mailto:sean.richardson@ccmsi.com">sean.richardson@ccmsi.com</a></p>
<p><b>Pam Butler</b> <i>Administrative Assistant</i> (217) 744-8010 Phone (217) 744-8011 Fax <a href="mailto:pbutler@toirma.org">pbutler@toirma.org</a></p>			<p><b>Tyler Knight</b> <i>Loss Control Representative</i> (217) 304-4482 Mobile (217) 444-1387 Phone (217) 477-6887 Fax <a href="mailto:tknight@ccmsi.com">tknight@ccmsi.com</a></p>

3217 Northfield Drive, Springfield, IL 62702-1400 • (888) 562-7861

## Human Resources Help Line

**(888) 472-6785** (All calls promptly returned within 24 hours.)

All TOIRMA members have access to Human Resources professionals to assist in answering employment-related questions and issues.

**The Human Resources Help Line covers many areas such as:** Discipline & Documentation • Legal Termination • Discrimination

Another service brought to you by TOIRMA.

[toirma.org](http://toirma.org)



# CLAIM REPORTING HOTLINE

**(844) 562-2720** | Available 24/7 | [toirma.org/claims-management](http://toirma.org/claims-management)

To report a claim, please call (844) 562-2720 with the following information:

**\* TOWNSHIP - TOWING/GLASS CLAIM**

- ✓ Township Name & County
- ✓ Mailing Address
- ✓ Phone#
- ✓ Date of Loss
- ✓ Year, Make & Model of Vehicle/Equipment

**\* LIABILITY CLAIM**

- ✓ Township Name & County
- ✓ Mailing Address
- ✓ Phone#
- ✓ Date of Loss
- ✓ Time
- ✓ Location
- ✓ Description of Incident
- ✓ Name, Address, Phone# of party claiming damage or injury
- ✓ Witness Name & Phone#
- ✓ Authorities & Report#

**\* WORKERS' COMPENSATION CLAIM**

- ✓ Township Name & County
- ✓ Mailing Address
- ✓ Phone#
- ✓ Date of Loss
- ✓ Time
- ✓ Location
- ✓ Employee Name, Address, Phone#
- ✓ Employee DOB, SSN & Date of Hire
- ✓ Employee's Direct Supervisor
- ✓ Employee's Job Description
- ✓ Description of Injury
- ✓ Body Part Involved
- ✓ Witness Information
- ✓ Treatment Facility Information
- ✓ Wage Statement if Lost Time

**\* TOWNSHIP - AUTO/INLAND MARINE/PROPERTY**

- ✓ Township Name & County
- ✓ Mailing Address
- ✓ Phone#
- ✓ Date of Loss
- ✓ Year, Make & Model of Vehicle/Equipment
- ✓ Address of Property Damaged
- ✓ Description of How Damage Occurred
- ✓ Description of Damage
- ✓ Township Driver Name & Phone#

**CLAIMS**

**Sarah Warfield**  
*Claim Associate*  
 (217) 444-1263 Phone  
 (217) 477-5985 Fax  
[sarah.warfield@ccmsi.com](mailto:sarah.warfield@ccmsi.com)

**Lisa Menner**  
*Claim Consultant*  
 (217) 444-1372 Phone  
 (217) 477-6490 Fax  
[lisa.menner@ccmsi.com](mailto:lisa.menner@ccmsi.com)

**Jacquitta Johnson**  
*Claim Representative*  
 (217) 444-1313 Phone  
 (217) 477-7227 Fax  
[jacquitta.johnson@ccmsi.com](mailto:jacquitta.johnson@ccmsi.com)

**Kim Rosdail**  
*Claim Consultant*  
 (217) 444-2165 Phone  
 (217) 477-7432 Fax  
[krosdail@ccmsi.com](mailto:krosdail@ccmsi.com)

**Bailey Ellison**  
*Claim Representative*  
 (217) 444-1418 Phone  
 (217) 477-3038 Fax  
[bellison@ccmsi.com](mailto:bellison@ccmsi.com)

**Julie Flynn**  
*Claim Supervisor*  
 (217) 444-1245 Phone  
 (217) 477-6645 Fax  
[jflynn@ccmsi.com](mailto:jflynn@ccmsi.com)

**Jessica Stitt**  
*Claim Representative*  
 (217) 444-1191 Phone  
 (217) 477-6691 Fax  
[jstitt@ccmsi.com](mailto:jstitt@ccmsi.com)