

Stockman, Tina

From: Soil & Water Conservation Program
Sent: Thursday, November 19, 2020 9:09 AM
To: Soil & Water Conservation Program; DNR.Soil and Water Conservation Districts staff
Cc: DNR.SWC Staff
Subject: RE: SWCD Health Insurance
Attachments: 2021 Health Insurance form.xlsx

Attached is a form titled "Health Insurance – [Calendar Year 2021](#)." The information on this form will be used to determine the health insurance allocation for the district for the remaining months of this fiscal year.

This form will need to be completed and returned to the program office **by December 31, 2020**. The completed form must be scanned and sent via email to soil&waterconservationprogram@swcd.mo.gov.

Please only submit one form per district.

If you have any questions please contact Jim Boschert at (573) 522-3320.

Thank you.

Soil and Water Conservation Program

We'd like your feedback on the service you received from the Missouri Department of Natural Resources. Please consider taking a few minutes to complete the department's Customer Satisfaction Survey at <https://www.surveymonkey.com/r/MoDNRsurvey>. Thank you.