



CVMA 22-5 VET TO VET STANDARD OPERATING PROCEDURE

The Vet to Vet process of awarding or denying grants to Veterans in need can be broken down into three simple parts, Intake, Evaluation, and Decision. The Chapter member who receives the request for assistance is the project coordinator for the Vet to Vet request.

Part One- Intake

In this phase, a CVMA member gains knowledge of a Veteran in need and conducts an intake discussion. In this stage, the CVMA member provides the applicant three forms: (1) The Vet to Vet Cover Letter; (2) the Grant Information Form, and (3) the Grant-Monthly Needs Form. At this stage, the CVMA member who is the project coordinator also obtains a copy of the Veteran's DD214.

Part Two- Evaluation

In this phase, the CVMA member who conducted the intake sends the completed Grant Information Form and Monthly Needs Form to the Chapter Commander. The Board of Directors will review and vote on approval or denial within 72 hours on Emergency Needs situations and advise the CVMA member who conducted the intake of the BOD decision. If the situation can wait, the item will be scheduled for discussion at the next Chapter meeting.

Part Three- Decision

In this phase, when advised of the BOD decision, the BOD will advise the applicant and the Treasurer will be instructed to make payment of the grant directly to the business entity involved. Except in rare circumstances, we never hand out money directly to the Veterans, but rather make payment to the companies involved.

Once grant approvals or denials are finalized, the documents related to the request will be forwarded to the Treasurer for filing and reporting purposes.



Combat Veterans Motorcycle Association
Chapter 22-5
Rob Richards, Commander

Board of Directors

Tony Paden
Executive
Officer

Jerime Cruz
Sergeant At Arms

Robert Gavurnik
Treasurer

Eric Wolfe
Public Relations

Adorian Lazar
Secretary

Dear Applicant:

The Combat Veterans Motorcycle Association Chapter 22-5 is a part of a nationwide Association of Combat Veterans from all branches of the United States Armed Forces. Our mission is: "Veterans Helping Veterans". We have members in nearly all 50 states and living abroad and are now over 18,000 strong nationally. We donate 100% of funds raised to various Veteran Service Organizations, Veteran charities and individual Veterans who are in need. Our focus is to help veterans in need and to help veteran care facilities provide emergency shelter, a warm meal, clothing, and guidance, or to say "Thank you and Welcome Home."

Unfortunately, we cannot provide construction services as we are not a licensed contractor and because we do not have the skills or experience we would need to undertake construction or building repair projects. We can provide simple help and labor for small household projects like stacking wood.

We are happy to consider monetary donations for any need experienced by Veterans, and ask all applicants to fill out the attached forms and to provide us a copy of their DD214 to certify military service. We do not provide funds directly to Veterans. Any monetary grants or donations are made directly to the businesses involved.

Warmest Regards,

Rob (Sr. Pappy) Richards

Chapter Commander
CVMA Chapter 22-5

Combat Veterans Motorcycle Association Chapter 22-5

"Veterans Helping Veterans" Information Sheet

Referred by: _____ Date: ____ / ____ / 20

Applicant's Name:		
Address:		
City, County, State, Zip:		
Name of Spouse:		
Phone Numbers:	Home:	Cell:
Email Address:		

Armed Forces Affiliation USA USAF USCG USMC USN ARNG ANG

Timeframe / Conflict Area

Veteran Organization Membership American Legion VFW VVA CVMA DAV

Place of Employment: _____ # Years: _____

Unemployed: Reason(s) _____

Amount(s) Requested: \$ _____ Date: _____ \$ _____ Date: _____

Amount(s) Granted: \$ _____ Date: _____ \$ _____ Date: _____

Additional: _____

Purpose(s) of Request(s): _____

Financial "To-Do" Sheet Completed?: YES NO Useful?: YES NO

Financial "Needs" Sheet Completed?: YES NO

Completed By: Name: _____ Date: ____ / ____ / 20

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Actual Monthly Needs Form

"Veterans Helping Veterans"

Name:

Date:

Member Name:

EXPENSES		ACTUAL HOUSEHOLD INCOME	
	\$\$		\$\$
Auto:gasoline		Your earnings	
Rent/ Mortgage		Spouse's earnings	
Food per week		Other (specify)	
Clothing			
Fuel			
Home/Rent Ins.			
Electricity			
Household			
Supplies			
Car Payment			
Car Insurance			
Health/Medical Care			
Cable TV			
Telephone			
Trash Remove			
Other (specify)			
TOTAL	\$	TOTAL	\$

Signature:

Print Name:

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Financial Difficulties TO-DO List:

Line up All the outstanding bills

Outstanding Bills:	To Whom	How Much	✓ When Accomplished
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
Total Owed:		\$	

How much can you Afford to Pay on each

Fuel/ Heat	\$	Electricity	\$	Food	\$
Transportation	\$	Property Tax	\$	Mortgage / Rent	\$
Auto Insurance	\$	Home Insurance	\$	Medical Insurance	\$

Contacting Companies

Company Name	Contact Name	Phone Number	Meeting Date

Be Honest - Talk to the folks, Explain the situation, and try to work out a Payment Plan