

# **RICHLAND COUNTY VETERANS SERVICE COMMISSION**

## **Applying for Temporary Financial Assistance**

### **Eligibility Requirements**

Section 5901.08 of the Ohio Revised Code establishes eligibility for financial assistance from county veteran service commissions. To qualify for assistance, an applicant must demonstrate financial need and unexpected hardship. Additionally, the applicant must be a veteran, an active duty member of the Armed Forces of the United States, or the spouse, surviving spouse (widow/widower), dependent parent, minor child, or ward of a veteran or active duty member of the Armed Forces of the U.S.

**Applicants must have been a bona fide resident of Richland County for at least three (3) months prior to the date of application.**

### **Required Documentation**

To expedite the processing of a claim for financial assistance, all applicants are required to present the following information at the time of application. Failure to produce this required documentation at the time of application will not result in denial of a claim, but will serve to delay processing of the claim until such time as the required information is properly submitted.

### **Basic Information:**

- DD-214 or other discharge papers, and/or DD-215 (active duty assignment)
- Verification of Richland County residency, i.e. valid Ohio driver's license or state id, mortgage/lease verification
- Social Security card for yourself and all members of your family for whom you are applying for assistance. If a card is lost the applicant must bring in official verification from the Social Security office.
- Marriage certificate, if currently married (not license)
- Divorce decree or legal separation papers. If the applicant claims to be separated, but is unable to provide legal evidence of the separation, he/she will be required to submit a notarized statement certifying the separation or a letter from his/her attorney verifying this separation.
- Death certificate, if appropriate
- Birth certificate(s) or custody papers of children
- Documentation formally verifying any legal name changes
- Correction facility release papers (if incarcerated within the last 12 months)
- If unemployed, a printout verifying online registration with the Ohio Department of Job and Family Services. This site can be accessed at [www.scoti.ohio.gov](http://www.scoti.ohio.gov).
- Current letter from a medical physician (not a chiropractor) clearly stating that the applicant/spouse is unemployable.

## **Income and Asset Information:**

- Payroll check stubs for past 4 weeks for applicant and spouse.
- Wage report for the past 30 days (from temporary employment agencies).
- A 454 form completed by the Ohio Bureau of Employment Compensation. To receive a copy of the 454 form, please call 1-877-644-6562 to file for unemployment compensation and to request that a copy of this form be mailed to your home  
**\*Note: Takes approximately 5 business days.**

- Verification of income from: VA pension or compensation received
- Social Security income/disability payments received, Union benefits received, Workers' Compensation received, Retirement payments received, such as State PERS/FERS, military pensions, union or company pensions, Rental income (statement from tenant), if self employed, monthly profit and loss statement for the last 30 days or quarterly estimated payments for federal and state taxes.
- Verification of all other types of income not noted above.

## **Expense and Liability Information:**

- Checking, savings and credit union statements (last two months)
- All credit card statements (last 2 months)
- Verification of next rent or mortgage payment due
- All current utility bills
- Auto payment verification (to include leased vehicles, motorcycles, recreational vehicles and boats).
- Estimates/Receipts for car repairs and other unexpected expenses (last 60 days)
- Medical, vision and dental bills (last 60 days)
- Police and fire department reports if unexpected theft, fire, or other losses (last 60 days).

To assist in the processing of an application for financial assistance, the client may be required to provide additional documentation. Please understand that the Veterans Service Commission may request this information to better serve a given client's individual case needs.

Please direct questions pertaining to information required for this application to the RCVSC Financial Aid Officer (419-774-5822).

**A Note on Fraud: Submission of any false information during the application process may lead to criminal prosecution, as well as automatic rejection of the application for aid. Every applicant seeking financial assistance from the Veterans Service Commission will be required to sign a statement indicating that all information submitted on the application is truthful and accurate. Clients who submit fraudulent case information are prohibited for all future Veteran Service Commission assistance.**

# Richland County Veterans Service Commission Financial Assistance Checklist

Write all monthly income below. Write the amount you have actually paid out pocket for each bill listed below for the past thirty days. You must have a receipt to go along with each amount listed below.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Total income for the past thirty days** \_\_\_\_\_

## **Expenses**

Mortgage/Rent/Deposits	_____	Telephone	_____
Metro Housing	_____	Transportation	_____
Gas/Fuel Heat	_____	Electric	_____
Child Support	_____	Loans	_____
Medical Payments	_____	Vehicle Payments	_____
Food Cost	_____	Food Stamps	_____
All Insurances	_____	Trash	_____
Water	_____	Taxes	_____
Credit Cards	_____	Vehicle Repairs	_____
Cash Advance	_____	Bankruptcy Payments	_____
Property Rentals	_____	Bank Statements	_____
Rent to own	_____	Other	_____

**Total Amount of Bills Paid** \_\_\_\_\_

**Total bills paid out of pocket for the past thirty days needs to be more than your income for the same period of time to show a need for assistance.**