

## **DEPARTMENT OF NEW YORK EMERGENCY RELIEF FUND**

The Department of New York established a Disaster Relief Fund following Hurricane Katrina on August 8, 2005 to assist those VFW Members and their families affected by the perils created by that storm. During that period thousands of dollars were sent to the affected areas to provide much needed relief by many VFW Departments. Following hurricane Katrina, natural disasters occurred in New York State which included a significant ice storm in the northern part of the State and floods in Herkimer and the Schoharie planes. Funds were disbursed in both cases to assist VFW Members and their families with their immediate needs. Subsequent to these disasters the name of the fund was changed to the Emergency Relief Fund but guidelines for distribution were not defined and documented in detail.

The purpose of this document is to provide the requirements and procedures for applying for matching funds from the Department of New York Emergency Relief Fund. The intent of the fund is to assist VFW Members and their families who have been exposed to and suffer damages as a result of a natural disaster, i.e. floods, hurricanes, ice storms, fires or other such similar occurrences.

Once a natural emergency has been declared by the Governor, Mayor, Town Supervisor or equivalent elected body, a VFW member may apply to the Department of New York for matching funds up to a maximum of seven hundred fifty dollars (\$750) from the Emergency Relief Fund for each declared emergency. The Department will consider the application. The application may receive an amount from the Emergency Relief Fund based on the monies the applicant has received from a District, County Council, Post, Auxiliaries or individual VFW or Auxiliary members. Distribution of funds will be based on funds available in the Emergency Relief Fund and limited to maximum amount per event as determined by the C of A. (*C of A is defined as The Department of New York Council of Administration*)

An application requesting matching funds must be submitted to the State Surgeon within ninety (90) days of the time the natural disaster has been declared. Photocopies of all checks for which matching funds are being requested must be attached. No funds shall be dispersed to a member not in good standing with the Veterans of Foreign Wars of the United States or its Auxiliaries.

The State Surgeon and his committee will review all applications for matching funds and will provide a recommendation to the Department Commander for each application. Should the disaster be of overwhelming magnitude the C of A may authorize the Department Commander and/or his designee to disperse at their discretion a predetermined amount of money! (*As an example, hurricane Katrina was a devastating disaster of extensive magnitude with wide ranging devastation*)

The policy shall encompass previous Department of New York Council of Administration action which provides for the Department of New York Emergency Relief Fund / Disaster Relief Fund. A minimum of five thousand dollars (\$5,000) shall be maintained in the fund for distribution. The fund may be expended in its entirety during a single natural disaster. Efforts must be made to replenish the funds as soon after the expenditure as practicable.

The Emergency Relief Fund shall be self-sustaining and supported solely by donations from posts, County Councils, Districts, Auxiliaries and individual members or others.

It shall be the Department Surgeon's duty to make annual appeals to the stated groups for donations to the Department of New York Emergency Relief Fund.

# DEPARTMENT OF NEW YORK EMERGENCY RELIEF FUND APPLICATION

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Date of Application: \_\_\_\_\_

**State Surgeon  
Department of New York  
Veterans of Foreign Wars  
69 Sand Creek Road, Albany, NY 12205**

I am applying for matching funds from the Department of New York's Emergency Relief Fund in the amount of \$ \_\_\_\_\_ .00 This is a direct result of unanticipated hardship from (*indicate the natural disaster and who declared said disaster*).

I have received matching funds in the amount of \$ \_\_\_\_\_ .00 from (District, County Council, Post or Auxiliaries). Copies of checks are attached.

Note Requirements: Once a natural emergency has been declared in an area by the Governor, Mayor, Town Supervisor or equivalent elected body, a VFW member may apply to the Department of New York for matching funds up to a maximum of seven hundred fifty dollars (\$750) from the Emergency Relief Fund for each declared emergency. The Department will consider the application and matching funds which the applicant has received from a District, County Council, Post, Auxiliaries or individual VFW or Auxiliary members. Distribution of funds will be based on funds available in the Emergency Relief Fund and limited to maximum amount per event as determined by the C of A.

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VFW Member Name: \_\_\_\_\_

VFW Member Card #: \_\_\_\_\_ Post #: \_\_\_\_\_

VFW Member Street #: \_\_\_\_\_

VFW Member State and Zip Code: \_\_\_\_\_

VFW Member Phone # With Area Code: \_\_\_\_\_

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### \* \* \* DISPOSITION \* \* \*

Date Received: \_\_\_\_\_ Amount Recommended: \$ \_\_\_\_\_ .00

Approved: \_\_\_\_\_ Disapproved / Reason: \_\_\_\_\_

Member Signatures: \_\_\_\_\_

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