

**NAVAJO NATION VETERANS ADMINISTRATION  
CHAPTER VETERANS ORGANIZATION**

TO: Accounts Payable Section, Financial Services Department

REQUESTOR: \_\_\_\_\_  
(name as it appears on social security card)

DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Social Security #: \_\_\_\_\_

ADDRESS MUST MATCH W-9

Phone #: \_\_\_\_\_

City State Zip

Your Relationship to Veteran, if NOT THE Veteran: \_\_\_\_\_

	<b>Assistance Type</b>	<b>Sub Account</b>	<b>Amount</b>
	<b>HARDSHIP</b> (food, utility bill, shelter, clothing, college tuition, veteran's workshop, veterans hospital appointment)	8060	\$ _____
	<b>ENERGY</b> (wood, coal, wood pellets & propane)	8065	\$ _____
	<b>SELF HELP MATERIALS</b> (lumber, door, pain, windows, door knobs, shingles, tiles, septic tank clean out, etc.)	8515	\$ _____
		<b>Total:</b>	\$ _____

**NOTE: \*\* A RECIPIENT MAY APPLY FOR MULTIPLE TYPES OF ASSISTANCE ON ONE NNVA FORM 101; EXAMPLE: VETERAN MAY APPLY FOR 1 HARDSHIP + 1 ENERGY + 1 HOME IMPROVEMENT AT ONCE. POLICY ALLOWS FOR SUCH REQUESTS TO BE MADE TO HELP THE VETERAN.\*\***

PURPOSE AND NEED FOR REQUEST: \_\_\_\_\_

\_\_\_\_\_

Requestor's Signature \_\_\_\_\_

Date \_\_\_\_\_

**OFFICIAL USE ONLY**

I have verified the Applicant meets the eligibility criteria (int) \_\_\_\_\_ : **Request is:** APPROVED DISAPPROVED

Reason for DISAPPROVAL: \_\_\_\_\_

Accountant Maintenance Specialist's Signature \_\_\_\_\_

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

Veterans Service Officer's Signature \_\_\_\_\_

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

Business Unit (BU) #: \_\_\_\_\_

Company (C)#: \_\_\_\_\_

Supplier (S) / Address Book (AB) #: \_\_\_\_\_ Batch (B) #: \_\_\_\_\_ Document (D) #: \_\_\_\_\_