## WISCONSIN DEPARTMENT of VETERANS AFFAIRS



Tony Evers, Governor | James Bond, Secretary-designee

Dear Veterans Service Organizations,

Under the provisions of Wisconsin Statute § 45.41, the Wisconsin Department of Veterans Affairs (Department) is accepting applications from state veterans service organizations for the Veterans Service Organization (VSO) Grant.

The provisions of this law require the Department to make each grant payment to an eligible VSO in an amount equal to 50 percent of all salaries and travel expenses during the previous fiscal year for those employees engaged in veterans' claim service and who are stationed at the Milwaukee VA Regional Office (VARO) or \$175,000, whichever is less. If the sum of payments payable to eligible VSOs should exceed the amount of funds appropriated, the Department must prorate the funds among the VSOs receiving payment.

Enclosed, please find the VSO Grant application packet which includes two documents comprising the application packet. The VSO Grant application packet is also available online at <a href="https://dva.wi.gov/Pages/benefitsClaims/Financial-Grants.aspx">https://dva.wi.gov/Pages/benefitsClaims/Financial-Grants.aspx</a>.

Completed applications must be received by the Department or postmarked no later than April 30, 2024.

The application must bear the VSO's name inserted in the appropriate places and signatures of the appropriate VSO official and the State Service Officer.

Application materials can be scanned and emailed to *VetsBenefitsGrants@dva.wisconsin.gov* (preferred). Please use **"2024 VSO Grant"** in the subject line. Applications may also be mailed to the Department address listed on the application or faxed to: (608) 264-0403. Indicate in the transmittal envelope or cover sheet that it is the 2024 VSO Grant.

If you have any questions regarding the VSO Grant, please submit an email to <u>VetsBenefitsGrants@dva.wisconsin.gov</u>.

Jeremy Lyon Division Administrator

Sincerely,

Enclosures
Application for Veterans Service Organization Grant (WDVA 0057)



Tony Evers, Governor | James Bond, Secretary-designee

### APPLICATION FOR VETERANS SERVICE ORGANIZATION GRANT

The information requested on this form is authorized for collection by Ch. 45, Wis. Stats., and VA 7, Wis. Admin. Code. The information collected is used to determine eligibility for grants awarded by the Department. Completion of this form is voluntary; however, failure to furnish the requested information may result in denial of eligibility for the grant. Personally identifiable information collected on this form is not likely to be used for any other purpose. The Department does not discriminate on the basis of race, color, national origin, sex, religion, age, or disability in employment or provision of services.

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accordance with Wisconsin Statute, § 45.41, and/or Chapter VA 7, Wisconsin Administrative Code, an applicational provide evidence of eligibility and the following exhibits, which are included with this application:	on
<ol> <li>A statement of salaries and travel expenses paid to employees who were engaged in veterans claims servic activities and who worked in the Milwaukee VA Regional Office, covering the period April 1, 2023 to M 31, 2024. The statement shall be certified as correct by a Certified Public Accountant licensed or certified under Wisconsin Statute Chapter 442 and sworn to as correct by the adjutant or principal officer of the Sta Veterans Service Organization.</li> </ol>	arch
2. A financial statement for your service organization for the previous fiscal year.	
3. If this is your organization's initial application for this grant, evidence to establish that it or its national organization, or both, has maintained a full-time service office at the Milwaukee VA Regional Office for to consecutive years out of the last 10 years.	ive
4. If this is not your organization's initial application, an affidavit by the adjutant or principal officer of your service organization stating that a full-time service office was maintained at the Milwaukee VA Regional Office for the entire period of April 1, 2023 to March 31, 2024.	
5. Evidence of claims service during the time-period of April 1, 2023 through March 31, 2024. Documentation of this evidence of claims service shall be provided by completing an Annual Report for Federal Benefits the WDVA VSO Grant-Federal Benefits Report form provided with this letter.	
onsistent with Wis. Admin. Code VA § 7.05, the Department retains the right to request additional information to termine the VSO's eligibility for the grant. By submitting this application, the below signatories designate each he authority to sign on behalf of the applicant and has the authority to accept funds on behalf of the applicant and a the below Terms and Conditions.	nas
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State Service Officer	

## WISCONSIN DEPARTMENT of VETERANS AFFAIRS



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# TERMS AND CONDITIONS APPLICATION FOR VETERANS SERVICE ORGANIZATION GRANT

- 1. The contents of this application will become contractual obligations if the applicant is awarded a grant.
- 2. By submitting this application, the applicant certifies to the best of their knowledge and belief that the information submitted is true and correct. The applicant understands that if funds are awarded, in addition to any other legal remedies, the funds awarded may be recouped at any time if it is later determined that any information submitted as part of this application was inaccurate or false.
- 3. The applicant understands that all application materials must be submitted at the same time as the application. An applicant who does not submit all requested exhibits will be considered to have submitted an incomplete application and the application will not be evaluated to determine if the applicant satisfies the requirements of Wisconsin Statute, § 45.41, and/or Chapter VA 7, Wisconsin Administrative Code, to be eligible for the grant.
- 4. The applicant understands and acknowledges that the Department may make a grant payment to an eligible applicant in an amount equal to 50 percent of all salaries and travel expenses during the previous fiscal year for those employees of the applicant engaged in veterans' claim service at the Milwaukee VA Regional Office, or \$175,000, whichever is less. If the total amount of payments committed to be paid to all eligible applicants exceeds the amount available for the payments from the appropriation for this grant under s. 20.485(2)(vw), Stats., the Department shall prorate the funds among the applicants receiving the payments.
- 5. Pursuant to s. 45.47, Stats., the applicant awarded a grant agrees to maintain records as required by the Department concerning the applicant's expenditure of grant funds and agrees to cooperate fully in any review and audit of grant expenditures. In addition to any other legal remedies available to the Department, the Department may recoup any grant funds awarded if the applicant does not comply with the audit.
- 6. By submitting this application, the applicant certifies that the applicant is compliant with applicable state and federal laws, rules, and regulations, including tax laws and requirements of the grant award.
- 7. In connection with the work performed to meet eligibility for this grant, the applicant certifies that it did not discriminate against any employee or applicant for employment because of age, race, religion, color, handicap, sex, physical condition, developmental disability, as defined in s. 5.01(5), Stats., sexual orientation, or national origin. This provision shall include, but not be limited to, the following: employment, upgrading, demotion or transfer, recruitment advertising, layoff or termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship.
- 8. The applicant understands that this application and other materials submitted to the Department may constitute public records subject to disclosure under the Wisconsin Public Records Law, s. 19.31, Stats.



REPORT FOR THE FISCAL YEAR

2024 ; FOR

## VETERANS SERVICE ORGANIZATION GRANT – FEDERAL BENEFITS REPORT

The information requested on this form is authorized for collection by Ch. 45, Wis. Stats., and VA 7, Wis. Admin. Code. The information collected is used to determine eligibility for a grant authorized by s. 45.41, Stats., and administered by the Department. Failure to furnish the requested information may result in denial of eligibility for the grant. Personally identifiable information collected on this form is not likely to be used for any other purpose. The Department does not discriminate on the basis of race, color, national origin, sex, religion, age, or disability in employment or provision of services or awarding grants.

From	April 1, 2023	, to	Ma	rch 31, 2024			
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	ACTIVITY		JMBER		COMN	IENTS	
	torney Indicate the number of new VA mitted to WDVA/Other VSOs for		1		0011111		
new and re-opened 526 or 21-527, or	ompensation Indicate the number of ed VA Form 21-526s, reconsiderations VA 21-other communications submitted for nefits to WDVA/VA or other VSOs.						
	cate the number of VA Form 21-527s or other submitted for veterans Pension benefits to her VSO.						
number of VA Fo	penses for Pension Indicate the orm 21p-8416s submitted for Unreimbursed s for pension and death pension to her VSOs.						
Loan Guara Loan applications	anty Indicate the number of Federal Home submitted.						
Educational benefit application	Indicate the number of Federal Educational ns submitted.						
	<b>Rehabilitation</b> Indicate the number of b applications submitted.						
	cate the number of VA Form 1010EZ forms ollment into VA Healthcare.						
number of Notice	tices of Disagreement Indicate the of Disagreements, VA Form 21-0958, DRO bmitted to WDVA/VA and other VSOs.						
	<b>liver Requests</b> Indicate the number of ers of Federal benefits regulations submitted.						
	<b>ls</b> Indicate the number of VA Form 9s VA/VA and other VSOs.						
Insurance I	ndicate the number of applications for VA						
	vances Indicate the number of applications lowance submitted.						
Flag Applic submitted for But	ations Indicate the number of applications rial Flags.						
	plications Indicate the number of nitted for Burial Markers.						
	he number of applications for Dependency ompensation, VA Form 21-534, submitted to other VSOs.						



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<b>Survivor's Pension</b> Indicate the number of applications for VA Death Pension, VA Form 21-534, submitted to WDVA/VA and other VSOs.	
<b>Discharge Correction</b> Indicate the number of applications for discharge upgrades submitted.	
Miscellaneous Indicate the number of applications for other federal benefits, not listed, submitted by your office.  Include types in comments.	