



Military Assistance Program Grant Guidelines



Purpose:

To provide financial assistance to VFW Posts/Depts. and Auxiliaries who sponsor events with their local military community. These funds are meant to build relationships and provide information on VFW programs and services.

How to apply for a MAP Grant:

1. Only a VFW or Auxiliary member may submit a MAP Grant Application.
2. The application must be signed and dated by the Post/Dept. Commander, Quartermaster or the Auxiliary President or Treasurer.
3. The grant is limited to basic food items and Non Alcoholic beverages for currently serving military and their family members only.
It does not cover equipment/venue rentals, gifts, decorations, entertainment, etc.
4. The grant does not cover public or formal events such as: Military Dining In/Out, Military Balls, Change of Command/Responsibility Ceremonies, etc.
5. The grant application must be submitted no later than 14 days **prior** to the event. Any exceptions to this must be submitted in writing to the Director VFW Programs for approval.
6. An After Action Report along with eligible receipts must be submitted within 30 days of the event. Non submission will result in the Dept./Post/Auxiliary being billed for the grant amount.
7. If the event receipts total less that the grant amount provided, the Dept./Post/Auxiliary will be required to refund the difference within 30 days.
8. If the event is cancelled a full refund is required. If rescheduled for a later date, a written explanation must be submitted to the MAP office detailing the new dates. It will be determined by the MAP office and VFW Program Director whether a refund will be requested or the Dept./Post/Auxiliary will be allowed to keep the grant amount.
9. MAP Grants may be submitted by the following:
 - Email: map@vfw.org
 - Fax 816-968-2779
 - Mail to:
VFW National Headquarters
ATTN: MAP
406 W. 34th Street, Suite 902
Kansas City, MO 64111

Note: Prior approval of similar events does not guarantee future approval. All applications must be signed and dated.

For any further questions or concerns please contact the MAP Office by phone at (816) 756-3390



Military Assistance Program Grant Application Instructions



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To ensure the grant is processed in a timely manner all information needs to be complete and accurate.

Payee (Dept./Post/Auxiliary) Section

- Fill out **Post # and Department** information completely and specify if the request is being submitted by the Auxiliary.
- **Federal Tax ID and 501(c)** IRS Guidelines require the Federal Tax ID number and 501 C designations to be on the application. Contact your Dept./Post/Auxiliary Quartermaster or Treasurer to obtain this information.
- Please make sure that the Point of Contact (POC) is the individual at the post that is handling the event. Do not put the Commander or Quartermaster's name as POC if another person is handling the event. The VFW POC information must include a phone number and email address.

Grant Amount Requested / Event Total Budget Amount

- The **Grant Amount Requested** This amount should be what you are requesting MAP to cover after all other contributions are made.
- The **Total Budget Amount** This is the approximate amount that includes all money spent on any items/activities. MAP Grant funds, post contributions and any other outside contributions such as the military unit, Family Support Group, other community/veteran's organizations, etc.
- The **Event information** must include: Event name or type of event, date, attendance, location and activities.
- The **Event Attendance** must specify the **number** of military and family members expected. Do not include dignitaries or VFW members here

Military Unit Information

- **National Guard and Reserve Meal Rations** If the event takes place during a training weekend (required attendance) all service members should be provided a meal by the government. If you are unsure about this information you should contact the unit to verify.

Community Involvement (NOT VFW) Section

- List all other **organizations** that are going to be involved with the event and their contribution.

Post Contribution and Involvement

- **Post contribution** is any monetary contribution from the Post/Dept. that is separate from the MAP Grant funds that are being requested.

Authorization Section

- Ensure that you read and check both **Acknowledgement 1 and Acknowledgement 2**
- The application must be **signed by the VFW Dept. / Post Commander or Quartermaster**. If it is being submitted by the **Auxiliary it must be signed by the President or Treasurer**.



Military Assistance Program (MAP) Grant Application



Payee (Dept./Post/Auxiliary):

Post/Aux # _____
 Department: _____
 Federal TAX ID# (9 digits) _____ - _____
 Exempt Status, 501(c) 3, 4 ___ 19 ___ (check one)
 Street Address: _____
 City/State/Zip: _____
 VFW POC: _____
 Email: _____
 Phone: (____) _____

Grant Amount Requested: _____

Event Total Budget Amount: _____

Event Name: _____

Event Date (s): _____

How many are expected to attend for each group:

Currently-serving Military: _____ Family: _____

Event Location: _____

Activities: _____

Military Unit Information:

Unit Name: _____

Branch of Service: _____

Component: Active ___ Reserve ___ Guard ___ (check one)

Installation city/state: _____

MPOC Name & Rank: _____

For National Guard and Reserve units only:

Is this a drill for the unit? _____

If it is a drill, is the unit contributing their meal Rations

(GOV funds) for the Military meals? _____

If not, why not? _____

Community Involvement (NOT VFW):

Will there be any other community involvement, including other veterans' organizations?

YES ___ NO ___

IF YES- List the businesses/groups that are participating & what they are contributing:

Post Contribution and Involvement:

Expected # of VFW/Auxiliary members attending? _____

Is the Post/Department contributing to the event with funds, goods or services beyond what MAP is being asked to provide? YES ___ NO ___

If yes, what amount? _____

Please check all activities VFW/Auxiliary members will assist with:

Plan ___ Shop ___ Set-up/clean-up ___

Cook ___ Serve ___ Assist children ___

Recruit ___ Provide VFW materials/info ___

Speak during event ___

Is the Post contributing any other kind of goods or services?

VFW Recognition (check all that applies):

Will you have a VFW banner or flag on display? _____

Will the members wear items with VFW logos? _____

Will the Unit's CO acknowledge the VFW's contribution during his/her remarks? _____

*****Authorization*****

Acknowledgement 1:

To facilitate compliance with IRS regulations, the VFW Military Assistance Program (MAP) will require the Post to provide a report including eligible receipts no later than 30 days after the scheduled event date. Failure to do so will result in a request from National Headquarters for a full refund of the Grant amount.

_____(Must be checked)

Acknowledgement 2:

This money will not be used for lobbying in any way.

_____(Must be checked)

Payee QM or Commander Signature

X _____ Date: _____

Printed Name and Title



Military Assistance Program Grant Report



Date of Event: _____

VFW Department: _____ District: _____ Post: _____

Type of Event (i.e., Welcome Home, Deployment, Family Briefing, etc.):

Full Unit Name:

Unit City / State:

Brief Description of Event: _____

Total amount of MAP funds utilized for the event. _____

Are Receipts for Expenditures Attached?: _____

Actual Attendance:

Number of Military: _____ Families: _____

Number of VFW and Aux members attending the event? _____

Number of others in attendance (dignitaries other groups etc)? _____

Number of Members Recruited at the Event?: _____

- Please attach any newspaper articles or links to articles on the internet.

Names of VFW National or Department Officers or Certified Recruiters who attended:

