



Operation 22 til Freedom

EMERGENCY ASSISTANCE

We will assist with rent, utilities, food cards, and gas cards.

We do not give cash or donate to links of fund me pages. Failure to show income and provide required documents will result in rejection of application. Any veteran who has received financial assistance from OTTF within the last three years, is not eligible. Assistance is based on need, income, and funds available in our emergency assistance fund.

Below, please find the criteria to apply and the application. Applications are open year round *based on available funds. They may take up to two weeks to receive depending on workload.

- Must have a DD214 showing discharge status with an honorable discharge. Or VA Benefits Summary Letter
- Must upload your bill or show bill proof.
- Must report your household income. Household thresholds follow:

| | |
|---|----------------|
| 2 | UP TO \$28,791 |
| 3 | UP TO \$36,272 |
| 4 | UP TO \$43,754 |
| 5 | UP TO \$51,236 |
| 6 | UP TO \$58,717 |
| 7 | UP TO \$66,199 |
| 8 | UP TO \$73,680 |

***Anyone who has received financial assistance from Operation 22 til Freedom is not eligible for any other financial assistance for the next three years.*

Please email your completed Application with the last 30 days of pay stubs, DD214 or VA Benefits Summary, and proof of bill and hardship to **Operation22tilFreedom.com**. If you do not have access to a scanner, please email us to make other arrangements for submitting your application and supporting documents.

Emergency Assistance Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Do you receive VA disability _____ If yes – What %: _____

Revenue

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Wages:\$ _____ Bonuses:\$ _____

May we contact your previous supervisor for a reference? YES NO

Partners
Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Wages:\$ _____ Bonuses:\$ _____

May we contact your previous supervisor for a reference? YES NO

Other forms
of Revenue: _____

Monthly Amounts\$ _____

Hardship

Brief Explanation _____

Type of Assistance Requested ___ Rent ___ Utilities ___ Food Cards ___ Gas Card Other: _____

Disclaimer

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to sponsorship, I understand that false or misleading information in my application may result in loss of sponsorship.

I understand that if awarded sponsorship I cannot receive financial assistance from Operation 22 til Freedom for the next three years.

I authorize Operation 22 til Freedom to review my attached DD214 or VA Benefits Summary Letter. .

Signature: _____ Date: _____