

DEPARTMENT OF VETERANS AFFAIRS

# GUIDEBOOK FOR CALIFORNIA INCARCERATED VETERANS



*With a Supplement for Veterans without a  
Scheduled Release Date*

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4TH EDITION

## Note to the Reader

*The Guidebook for California Incarcerated Veterans* is an official publication of the US Department of Veterans Affairs (VA). Most of it was written for veterans who were recently released or have a scheduled release date. Page 1 of the Guidebook states “The primary objective of this document is to assist Veterans in preparation for release.” This publication includes the entire, unaltered official Guidebook.

An unofficial supplement has been developed for veterans to provide additional specific information for incarcerated veterans **who do not have a scheduled release date**. The supplement focuses on disability compensation, which is usually the best VA benefit available to incarcerated veterans. The supplement, beginning on page 106, includes:

1. a review of veteran status requirements so former service members can confirm their status as veterans or possibly obtain veteran status (especially former Reserve/Guard members who did not have active duty), and
2. options for veterans with “bad paper,” and
3. detailed guidance about VA disability compensation written solely for veterans who do not have a scheduled release date, and
4. copies of most of the (current at the time of publication) forms incarcerated veterans may need.

The supplement is not a federal publication, but in keeping with federal policy regarding copying publications, permission is hereby granted to copy or quote the Guidebook Supplement, either partially or in its entirety. It is my intent to ensure the information is distributed as widely as possible.

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## Section I

This Guidebook is for Veterans of the U.S. Armed Forces confined in either a state or federal correctional facility in the state of California. Almost all who served the U.S. Armed Forces have resources available when released from custody. Knowledge about eligibility and access are frequently misunderstood. The contents of this Guidebook explain what you need to know. Often Veterans hear rumors and conclude they are ineligible based on what they heard. Learning the resources that will be available to you at your release begins by taking your time with this publication. VA and many other Veteran support organizations are listed within these pages. For example Section V offers a wealth of information about the resources available through the California Department of Veteran Affairs.

Careful planning prior to release from custody will improve your options and resources when you return to your community. For those Veterans with time left on your sentence this Guidebook offers useful information and guidance to assist you with information about Service Connected Disability Compensation as well as preparation for a Parole Board hearing.

The primary objective of this document is to assist Veterans in preparation for release. Section II focuses on what you can do while incarcerated with later sections focus on information you may need after release. Some of the resources you seek after release provide phone numbers or web addresses. These resources are mostly unavailable while incarcerated so prepare to make contact once you arrive to the community.

This is your book. Take notes as you look through it to highlight important details to reference later. When you are released **bring this book with you.** Many of your immediate needs can be addressed from the resources and services listed within these pages. Supports are available in your community you just need to know where to find them.

Information listed in the Guidebook is current as of July 2013. Due to the continuous changes within the community, resources may change at any time. To promote the most accurate detail of resources and services available to you VA has established the VA Re-entry Specialist position. Continue to read to learn more about VA Re-entry Specialists and the many other supports available to Veterans.

## **SECTION II**

### **PREPARING FOR YOUR RELEASE**

#### **VA Re-entry Specialist**

Each region of the U.S. has an assigned Re-entry Specialist. They are charged with offering assistance to individuals with a history of U.S. Military service and now preparing for release from state and federal custody. They can assist you in determining your eligibility for resources and assist your access to VA Healthcare. They can assist you with VA Enrollment, restarting your disability benefits, securing your DD-214, provide you with resource points of contact and linkages to the services for which you are eligible.

An individual meeting with the Re-entry Specialist occurs as a VA eligible Veteran nears their release date. VA works in collaboration with the state and federal correctional facilities to identify individuals with a history of U.S. Military Service preparing for release from custody. When time is available the Re-entry Specialist will also arrange a group meeting for any interested Veterans wishing to learn about any recent Veteran specific updates or have general questions. Please take advantage of the group meetings when they are offered as this opportunity is not available at every visit. Due to their ongoing travel in the field VA Re-entry Specialists are unable to address needs by mail.

#### **Steps To Enroll With VA**

VA Enrollment opens doors to Veteran healthcare, supports and resources. Learning your eligibility for VA is accomplished by completing VA Form 10-10EZ. To acquire VA Application by mail write to the VA located closest to your location of release. Use the mailing address near the end of this section to have your request addressed by the Enrollment Department of your VA. VA Healthcare System locations are also listed in Section V of this book. Indicate on the envelope VA enrollment. Another avenue to enroll with VA is with the VA Re-entry Specialist when they visit your location. Visits are scheduled to occur at least yearly. If you are within 6 months of your release date and have not met with the Re-entry Specialist consider enrolling by mail to ensure VA resources will be available when you arrive to the community.

#### **VA Application for Health Benefits, VA Form 10-10 EZ**

You are encouraged to complete the 10-10EZ if any of the following applies to you:

- You don't know if you are eligible for VA Healthcare
- You are enrolled with VA but need to update the financial information requested each year
- You were previously ineligible for VA due to income (income limits have adjusted)
- You were told you weren't eligible for VA but don't understand why

Eligibility is based on many factors including when you served, length of active duty, and military discharge type and only VA can provide you with your eligibility and VA Enrollment. Completing VA Form 10-10EZ prior to release ensures problems with enrollment can be sorted out and VA Healthcare and services can start immediately upon release. VA is often able to verify your military service through information provided by the Dept. of Defense. If unable to verify military service VA may require a copy of your DD-214. This document can be requested by mail and you can either mail it to VA or present it when you are released to VA.

Take care to fully complete VA Form 10-10EZ. If not properly and fully completed VA is unable to finalize your enrollment registration. All blanks on the application must be answered. Unless your eligibility is based on a Service Connected Disability, Purple Heart award or Prisoner of War status, questions asking for financial information must be completed; if your answer is zero please indicate 0 in the spaces provided. N/A or a line cannot be accepted when asking for a dollar figure. Questions not answered could prevent processing of the application and delay your eligibility for VA services. Income information is for the previous calendar year. Most Veterans while incarcerated will meet financial requirements for VA Health services. The results of your VA application for Healthcare Services will be sent to the location you indicated was your permanent address on the 10-10EZ. If you have an extra copy of your DD-214 (Military Discharge Papers and Separation Documents) submitting it with your VA application will assure your military service is verified.

### **Mailing Address for Application for Health Benefits, VA Form 10-10EZ**

You are welcome to mail your VA Form 10-10EZ Application for Health Benefits directly to your VA if you wish. Below are the mailing addresses for each VA Enrollment office.

#### **Mather VA Medical Center**

Attn: Business Office (BDMS/SAC)  
10535 Hospital Way  
Mather, CA 95655

#### **VA Sierra Nevada Healthcare System**

Mail Code 04-PB  
1000 Locust Street  
Reno, Nevada 89502

#### **San Francisco VA Medical Center**

4150 Clement Street  
San Francisco, CA 94121-1545  
Attn: Member Services (136A1)

#### **VA Palo Alto Health Care System**

3801 Miranda Ave.  
Palo Alto, CA 94304  
ATTN: 136A Admissions & Eligibility

#### **VA Central California Healthcare System**

2615 E. Clinton Ave  
Fresno, CA 93706  
Attn: 570/136

#### **VA Loma Linda HCS (136/161-ELG)**

11201 Benton Street  
Loma Linda, CA 92357

**VA Long Beach Healthcare System**

Patient Business Office - 00C  
5901 East 7<sup>th</sup> St.  
Long Beach, CA 90822

**Greater Los Angeles Healthcare System**

11301 Wilshire Blvd (04E)  
Los Angeles, California, 90073

**VA San Diego Healthcare System**

Health Benefits and Enrollment (136E)  
3350 La Jolla Village Drive  
San Diego CA 92161

**Report of Separation / D-214**

Report of Separation from your branch of military service is an important document to have in your possession once released. Employment opportunities and community resources are offered to individuals with proof of their military service. This document can also be needed to confirm your eligibility for VA Healthcare. You can write to the National Personnel Records Center, 1 Archives Drive, St. Louis, MO 63138 to request your DD-214. If you do not have the form SF – 180 request a copy of this form and return to the location indicated for your branch of service. Many Veterans have requested their DD-214 while incarcerated and received it within a month of their request.

**Loss of Military Service Records due to 1973 fire at National Personnel Records Center**

On July 12, 1973, a disastrous fire at NPRC (MPR) destroyed approximately 16-18 million Official Military Personnel Files. The affected record collections are described below.

Branch	Personnel and Period Affected	Estimated Loss
Army	Personnel discharged November 1, 1912, to January 1, 1960	80%
Air Force	Personnel discharged, September 25, 1947, to January 1, 1964 (with names alphabetically after Hubbard, James E.)	75%

The National Archives and Records Administration has developed NA Form 13055, Request for Information needed to Reconstruct Medical Data for those records destroyed in the 1973 fire. You may inquire about use of that form by writing directly to the National Archives:

National Personnel Records Center  
(Military Personnel Records)  
9700 Page Avenue  
St. Louis, MO 63132-5100

## **Already VA Enrolled?**

If you have a Veteran Identification Card (VIC) and will be returning to the same VA facility where you previously received Health Services you are not required to complete the 10-10EZ. You may be asked to update your Means Test (financial income for the previous year) If your VA Enrollment was not based on a Purple Heart, Prisoner of War status or you don't have a Service Connected Disability Benefit. If you will be utilizing a different VA facility, it will expedite receiving VA services by sending the VA 10-10EZ to VA nearest to your destination.

## **Preparing for Parole Board Hearing**

Access to Veteran resources and enrollment with VA offers many valuable resources in preparing your plan for release. VA is currently with a national commitment to end Veteran homelessness. This message has helped to raise awareness of VA's resources and ability to help Veterans in need of housing and the tools to address your establishing yourself in the community. Please be advised few resources are able to make an open ended commitment as availability of a resource is dependent on the number of Veterans in need of the resource at that time.

## **Correction of Military Record and Upgrade of Discharge**

If results of your VA application indicate you are ineligible for VA Healthcare your letter will explain the reason. If ineligibility was based on your military discharge type it's possible to pursue an upgrade through your branch of military service. If separated from the military within the past fifteen years use DD Form 293, Application for the Review of Discharge or Dismissal from the Armed Forces of the United States. This document can be requested by writing to your branch of military service.

## **VA Service Connected Disability Compensation and VA Pension**

If you have been awarded a Service Connected Disability or VA Pension the amount may have been suspended or reduced to the 10% payment level while you are in custody. If your Disability Compensation is at the 10% level your benefit while incarcerated in half of what you received prior to incarceration.

To reactivate the benefit submit completed VA Form 21-4193 to the Veterans Benefits Administration Regional Office found in Section IV of this Guidebook. You will need a TCMP counselor or other CDCR official to complete item #6 - #16 of this form. The Veterans Benefits Administration will allow this form to be submitted up to thirty days prior to your release to help with expediting reactivation of your VA Disability Compensation.

In the event you have incurred an overpayment which means payments of your benefit while incarcerated, you will be required to repay the overpayment or receive an approved re-payment plan with the Veterans Benefits Administration before your benefits will restarts. Arrangements for addressing overpayments must be addressed with the Veterans Benefits Administration at the Regional Office or by calling at 1-800-827-1000.



This table is offered to assist you with keeping track of information you find in this Guidebook and to list needs to be addressed. For example identify the page of a resource you may want to use in the future. It will be easier to find the page rather than shuffling through all of the pages to find the resource you noticed before.

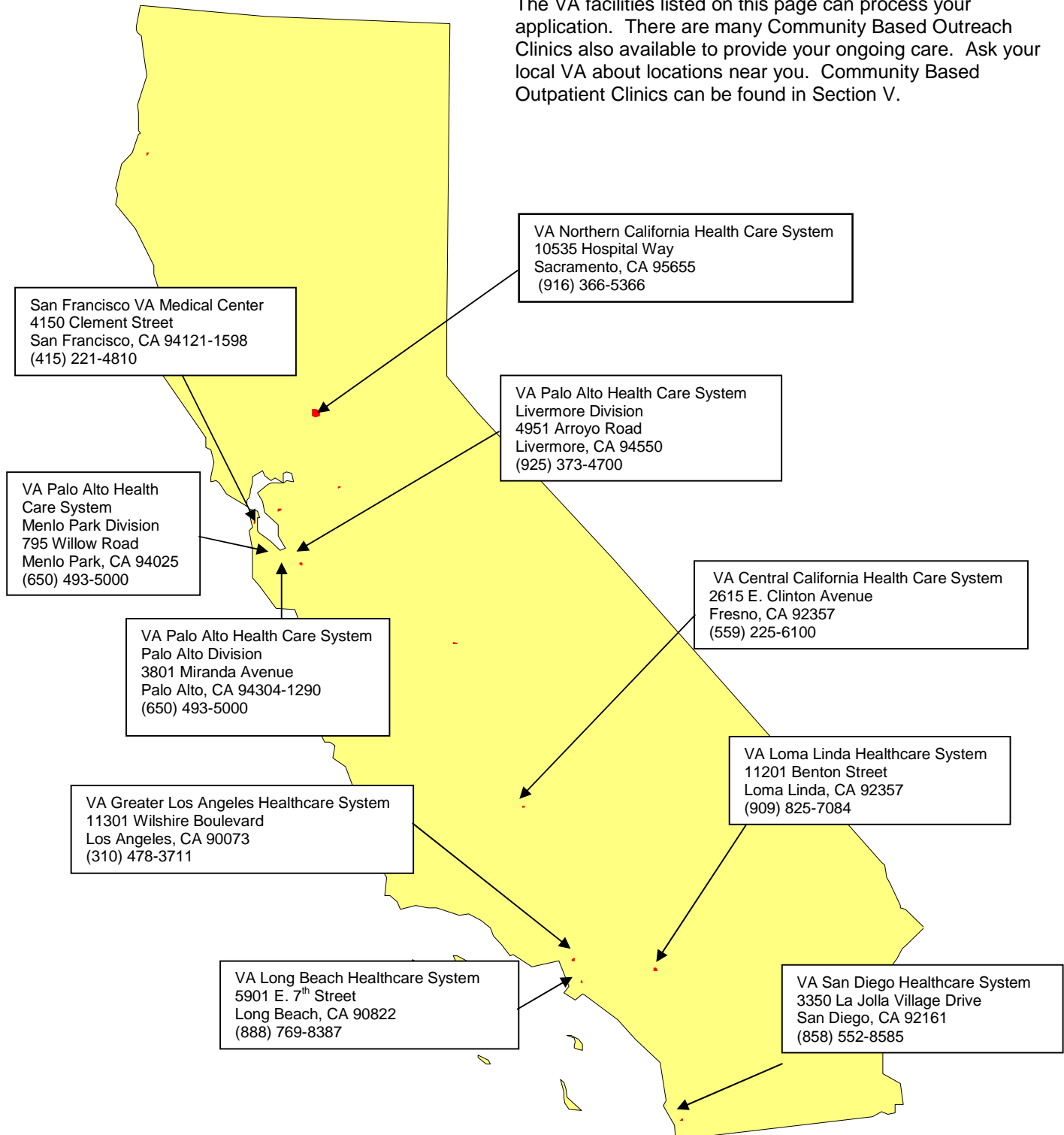
<b>Immediate Concerns</b>	<b>Describe</b>
Housing	
Clothing	
Transportation to Parole	
Medication	
ID	
Paroled to unfamiliar location w/ few supports	

<b>Financial</b>	<b>Describe</b>
Employment	
Child Support/Alimony	
Credit Debt	
Disability/Pension Money	
Motor Vehicle fines	
Debt/Credit Issues	

<b>Health</b>	<b>Describe</b>
Medical Concerns	
Addictions Treatment	
Mental Health Needs	
Barriers to Working	

<b>Legal</b>	<b>Describe</b>
Traffic	
Child Custody	
Restitution	
Marital Status	
Anger Management Classes	
Domestic Violence Classes	
Parole Restrictions	

The VA facilities listed on this page can process your application. There are many Community Based Outreach Clinics also available to provide your ongoing care. Ask your local VA about locations near you. Community Based Outpatient Clinics can be found in Section V.



## VA MEDICAL CENTERS

<b><u>VA Palo Alto Health Care System</u></b> <b>Palo Alto Division</b>	3801 Miranda Avenue Palo Alto, CA 94304-1290	(650) 493-5000 or 800-455-0057
<b><u>VA Palo Alto Health Care System</u></b> <b>Menlo Park Division</b>	795 Willow Road Menlo Park, CA 94025	(650) 493-5000
<b><u>VA Palo Alto Health Care System</u></b> <b>Livermore Division</b>	4951 Arroyo Road Livermore, CA 94550	(925) 373-4700
<b><u>VA Central California Health Care System</u></b>	2615 E. Clinton Avenue Fresno, CA 93703	(559) 225-6100 or (888) 826-2838
<b><u>VA Northern California Health Care System</u></b>	10535 Hospital Way Sacramento, CA 95655	800-382-8387 or 916-366-5366
<b><u>San Francisco VA Medical Center</u></b>	4150 Clement Street San Francisco, CA 94121-1598	(415) 221-4810 or (800) 733-0502
<b><u>VA Greater Los Angeles Healthcare System (GLA)</u></b>	11301 Wilshire Boulevard Los Angeles, CA 90073	(310) 478-3711 or (800) 952-4852
<b><u>VA Loma Linda Healthcare System</u></b>	11201 Benton Street Loma Linda, CA 92357	(909) 825-7084 or (800) 741-8387
<b><u>VA Long Beach Healthcare System</u></b>	5901 E. 7th Street Long Beach, CA 90822	(562) 826-8000 or (888) 769-8387
<b><u>VA San Diego Healthcare System</u></b>	3350 La Jolla Village Drive San Diego, CA 92161	(858) 552-8585 or (800) 331-8387

## SECTION III

### Veteran Resources Available in the Community

#### VA Housing

If you met with the Re-entry Specialist and received instructions for housing proceed with those arrangements. If starting fresh each VA has a Health Care for Homeless Veteran program ready to help you. They have knowledge about housing choices near your location. Depending on circumstances housing may be available the day you arrive. If the VA Medical Center is a distance from you call the toll free phone number found in Section V or the National Call Center for Homeless Veterans hotline available 24/7 at 1-877-424-3838. There you will find a VA counselor available to help you.

VA offers a variety of housing supported programs for Veterans designed to support your individual needs. A counselor will speak with you about your goals to best determine the resources available to best meet your needs. Housing options include:

**Grant & Per Diem (GPD) housing:** GPD housing promotes the development and provision of supportive housing and/or supportive services with the goal of helping homeless Veterans achieve residential stability, increase their skill levels and/or income, and obtain greater self-determination. **(Veterans ineligible for VA Enrollment may be eligible to receive GPD housing when available. Inquire at your VA if this option is an option for you).**

**Health Care for Homeless Veterans Contracts (HCHV):** Provides emergency housing, shelter and treatment through local community providers. Local VA facilities contract with community agencies for beds which are available to Veterans enrolled in VA Healthcare.

**Supportive Services for Veteran Families Grants (SSVF):** VA grants provided to non-profit organizations to assist homeless and at-risk of homeless Veterans and their families to maintain or return to permanent housing. **(Veterans ineligible for VA Enrollment may be eligible to receive SSVF assistance if available. Inquire at your VA if this option is an option for you)**

**VA Supportive Housing (HUD-VASH) Program:** is a joint effort between HUD and VA to move Veterans and their families out of homelessness and into permanent housing. HUD provides housing assistance through its Housing Choice Voucher Program (Section 8) that allows homeless Veterans to rent privately owned housing. VA offers eligible homeless Veterans clinical and supportive services through its health care system.

**Mental Health Residential Rehabilitation and Treatment Programs (MH RRTPs):** MH RRTPs provide state-of-the-art, high-quality residential rehabilitation and treatment services for Veterans with multiple and severe medical conditions, mental illness, addiction, or psychosocial deficits. The MH RRTP identifies and addresses goals of rehabilitation, recovery, health maintenance, improved quality of life, and community integration in addition to specific treatment of medical conditions, mental illnesses, addictive disorders, and homelessness. The residential component emphasizes incorporation of clinical treatment gains into a lifestyle of self-care and personal responsibility.

**\* Housing providers are required to verify you are free of Tb. If you have had a Tb test within the past year request a copy of the results before release from incarceration. If you do not have a recent Tb clearance request the test so you can have this document available for rapid housing.**

**\*\* Some Parole restrictions on approved housing may diminish your VA Housing options due to incompatibility with the Parole criteria.**

### **Homeless Veteran Dental Program**

Veterans receiving at least sixty days of VA residential services addressing their homelessness may be eligible for a one time dental service. Inquiry to this onetime benefit should be addressed with the VA case manager assigned to you in the residential program.

### **Completing VA Enrollment**

The Department of Veterans Affairs (VA) provides eligible Veterans a Veterans Identification Card (VIC) for use at VA Medical Facilities. The VIC protects the privacy of Veterans' sensitive information, as it no longer displays the Social Security Number or Date of Birth on the front of the card. The VIC will only display the Veteran's name, picture, and special eligibility indicators - Service Connected, Purple Heart and Former POW, if applicable, on the front of the card. Only Veterans who are eligible for VA medical benefits will receive the card.

Each VA has an Enrollment Office sometimes called the Patient Business Office. If you do not have your VA identification card (VIC Card) you can obtain this important ID there. Bring identification to present your identity. VA personnel will look-up your enrollment information in the VA database and complete your VA Enrollment by taking your picture for your VIC Identification Card. The card can be mailed to you in approximately five business days or you can return to pick-up your card.

### **Scheduling a Medical Appointment**

VA is committed to providing high-quality, clinically appropriate health care - when you want and need it. This commitment includes the ability to make appointments that meet your needs, with no undue waits or delays. We monitor the wait times for scheduled appointments, and give you the opportunity to complete a survey to tell us whether you received an appointment when you wanted one. To schedule a medical appointment call your assigned Primary Care Clinic.

### **Medical Care if not eligible for VA Healthcare**

National Health Care for the Homeless Council includes thousands of providers and consumers of health care targeted to people without homes, working together to end homelessness by improving health care access and quality. Within their provider network are thousands of community clinics offering care and services to individuals without a healthcare provider. Learn more about resources available in your local area by calling California 211 information and referral service, dial 211 on your phone.

### **Addictions Treatment and Mental Health Services**

VA offers a wide variety of supports and treatment services to Veterans needing to address their concerns related to addictions and mental health. Also if you are under the supervision of Parole or Probation with a requirement to participate in treatment VA may be an acceptable path to your supervising authority. If you are interested in addressing addictions issues contact the treatment clinic directly or consult with your Primary Care Clinic.

### **Finding & Keeping a Job**

Seeking employment after incarceration can be challenging but there is help. Many incentive programs are available to support Veterans get a job. Incentives are made available to employers in the form of tax deductions for a hiring a Veteran. Training Veterans to be job ready is another approach in use. Inquire at the California Employment Department (EDD) about programs operating at the time of your release. Each community also sponsors Veteran Job Fairs and other locally sponsored activities to support the hiring of Veterans. Continue to read to learn about other employment support resources targeting Veterans.

VA's **Compensated Work Therapy Program (CWT)** is a therapeutic vocational service available to some Veterans. CWT offers structured work opportunities and supervised therapeutic housing for at-risk and homeless Veterans with physical, mental health and addictions problems. VA contracts with private industry and the public sector for work by these Veterans, who learn job skills, re-learn successful work habits, and regain a sense of self-esteem. Veterans are paid for their work and given assistance with employment in the community. Check with your VA about other employment support options.

### **California Employment Development Department**

The Employment Development Department (EDD) assists veterans and their eligible spouses maximize their employment and training opportunities. Veterans are entitled to many resources designed to help in their search for employment. The EDD veterans' representatives specialize in assisting veterans in their efforts to return to work and are located in many local EDD offices. Services provided include a veteran 24-hour priority hold on all job listings, customized job search assistance, job fairs, employer recruitments, and other events and resources. Veterans are encouraged to schedule an appointment with an EDD veterans' representative for personalized services and assistance to achieve professional goals.

Eligibility for these EDD services includes meeting one of the following:

1. Served on active duty in the United States armed forces (not Reserve or National Guard Training) for a period of more than 180 days and was discharged or released with an other than dishonorable discharge.
2. Was discharged or released from active duty because of a service-connected disability.
3. Was a member of a reserve component, including the National Guard, under an order to active duty pursuant to Section 672(a), (d), or (g), 673, or 673(b) of Title 10, (and) served on active duty during a period of war, in a campaign, or expedition for which a campaign badge was authorized, was discharged or released with an other than dishonorable discharge.

Check with your local EDD for other Veteran status meeting eligibility criteria.

### **United States Department of Labor**

The Department of Labor allocates grants to State Workforce Agencies to fund the following staffing Disabled Veterans' Outreach Program Specialists and Local Veterans' Employment Representatives. These grants provide funds to exclusively serve veterans, other eligible persons, transitioning service members, their spouses and, indirectly, employers. The grant also gives the State the flexibility to determine the most effective and efficient distribution of their staff resources based upon the distinct roles and responsibilities of the two positions.

DVOP and LVER staff provides services to all veterans that Title 38 indicates are eligible for their services, but their efforts are concentrated, according to their respective roles and responsibilities, on outreach and the provision and facilitation of direct client services to those who have been identified as most in need of intensive employment and training assistance. DVOP and LVER staff, through outreach with employers, develops increased hiring opportunities within the local work force by raising the awareness of employers of the availability and the benefit of hiring veterans.

### **Disabled Veterans' Outreach Program Specialists**

Disabled Veterans Outreach Program (DVOP) specialists provide intensive services to meet the employment needs of disabled veterans and other eligible veterans, with the maximum emphasis directed toward serving those who are economically or educationally disadvantaged, including homeless veterans, and veterans with barriers to employment. DVOP specialists are actively involved in outreach efforts to increase program participation among those with the greatest barriers to employment which may include but should not be limited to: outplacement in Department of Veterans' Affairs (DVA) Vocational Rehabilitation and Employment Program offices; DVA Medical Centers; routine site visits to Veterans' Service Organization meetings; Native American Trust Territories; Military installations; and, other areas of known concentrations of veterans or transitioning service members. The case management approach, taught by the National Veterans' Training Institute, is generally accepted as the method to use when providing vocational guidance or related services to eligible veterans identified as needing intensive services.

### **Local Veterans' Employment Representatives**

Local Veterans' Employment Representatives conduct outreach to employers and engage in advocacy efforts with hiring executives to increase employment opportunities for veterans, encourage the hiring of disabled veterans, and generally assist veterans to gain and retain employment. LVER staff conducts seminars for employers and job search workshops for veterans seeking employment, and facilitate priority of service in regard to employment, training, and placement services furnished to veterans by all staff of the employment service delivery system.

To meet the specific needs of veterans, particularly veterans with barriers to employment, DVOP and LVER staff are thoroughly familiar with the full range of job development services and training programs available at the State Workforce Agency One-Stop Career Centers and Department of Veterans' Affairs Vocational Rehabilitation and Employment Program locations.

### **Department of Rehabilitation Services (DORS)**

California Department of Rehabilitation Services offers a wide array of employment supports and assistance to individuals with disabilities. DORS works in partnership with consumers and other stakeholders to provide services and advocacy resulting in employment, independent living and equality for individuals with disabilities.

### **GI Bill**

Application for GI Bill can be completed online, <http://gibill.va.gov/apply-for-benefits/>

If you don't have the capability to apply online, you can call 1-888-GI BILL-1 (1-888-442-4551) to have a form mailed to you. You may also receive an application form at the school or training establishment you wish to attend. The VA Certifying official at the school (usually located in the Registrar's or Financial Aid office) should have the forms available, can assist you in filling them out, and will submit them to VA.

### **Refund of the Montgomery GI Bill \$1200 Buy-In for Post 9/11 GI Bill Recipients**

Individuals who entered Active Duty after June 30, 1985 OR who served a combination of at least 2 years of Active Duty service and 4 years of Selected Reserve service after June 30, 1985 may qualify to receive a refund of the \$1,200 deduction for the Montgomery GI Bill - Active Duty (Chapter 30) under the Post-9/11 GI Bill (Chapter 33).

- Individuals must have made an irrevocable election to use Chapter 33 by relinquishing benefits under Chapter 30 and had entitlement remaining as of the date of relinquishment of Chapter 30.
  - Only individuals who actually made the contributions may receive the refund.
  - Individuals must be receiving a housing allowance at the time entitlement exhausts to receive the refund.
  - Individuals receiving transferred benefits are not entitled to the Chapter 30 refund.
- The amount of the refund will be equal to the number of months and days the individual had remaining under Chapter 30 divided by 36 months multiplied by \$1200.

### **Other Resources to Explore**

Section V of this Guidebook offers many resources by county. Take some time to look through these resources and mark the ones you may want to consider using when you arrive to your county.

### **Financial Help**

Rebuilding your life after incarceration takes time and resources. Starting out with any form of income makes that difficult task even harder. Each region of California offers help with learning what resources are available in your area. Call 2-1-1 on your phone for information about what is available to you.

### **Legal Resources**

**Stateside Legal** offers legal help for military members, Veterans and their families. Refer to the resources in the last section of this Guidebook to learn about what is available in your jurisdiction.

The GI Rights Hotline (877-447-4487) uses trained civilian counselors to provide counseling and information on military discharges, AWOL and UA, and GI Rights. It includes both a national program and local hotline branches around the country.



## **SECTION IV SEEKING FEDERAL BENEFITS**

The Department of Veterans Affairs is divided into three administrations: Veterans Health Administration (VHA), Veteran's Benefits Administration (VBA) and National Cemetery Administration. This section of the Guidebook offers information about the Veterans Benefits Administration programs, to include: Disability Compensation and Pension programs, Education Programs, Loan Guaranty (Home Loans), and Vocational Rehabilitation and Employment. Benefits offered through these programs are managed by the Regional Office closest to your residence. The three offices in California are:

**Los Angeles Regional Office  
11000 Wilshire Blvd  
Los Angeles, CA 90024**

**San Diego Regional Office  
8810 Río San Diego Drive  
San Diego, CA 92108**

**Oakland Regional Office  
1301 Clay Street, Room 1300 North  
Oakland, CA 94612**

The programs and resources listed in this section are under the authority of the VBA. Submit your request in writing to VBA and include identifying information such as your File # for a case in process as well as your Social Security Number. Once you have access to a phone you may also speak to VBA by phone, 1-800-827-1000.

**Disability Compensation (Service Connected Disability)** is a tax-free monetary benefit paid to Veterans with disabilities that are the result of a disease or injury incurred or aggravated during active military service. Compensation may also be paid for post-service disabilities that are considered related or secondary to disabilities occurring in service and for disabilities presumed to be related to circumstances of military service, even though they may arise after service. Generally, the degrees of disability specified are also designed to compensate for considerable loss of working time from exacerbations or illnesses.

### **VA Pension**

VA helps Veterans and their families cope with financial challenges by providing supplemental income through the Veterans Pension benefit. Veterans Pension is a tax-free monetary benefit payable to low-income wartime Veterans.

#### Eligibility

Generally, a Veteran must have at least 90 days of active duty service, with at least one day during a wartime period to qualify for a VA Pension. If you entered active duty after September 7, 1980, generally you must have served at least 24 months or the full period for which you were called or ordered to active duty (with some exceptions), with at least one day during a wartime period.

In addition to meeting minimum service requirements, the Veteran must be:

- Age 65 or older, **OR**
- Totally and permanently disabled, **OR**

- A patient in a nursing home receiving skilled nursing care, **OR**
- Receiving Social Security Disability Insurance, **OR**
- Receiving Supplemental Security Income

## **Service Connected Disability Compensation and Veterans Pension During Incarceration**

Veterans incarcerated and incarcerated dependents may apply for the same compensation, dependency and indemnity compensation (DIC) – service-connected death benefits – and pension benefits as Veterans who are not incarcerated. However, Congress restricts the amount of benefits that may be paid to a Veteran or dependent while he or she is incarcerated. These benefits are institutionalized as part of law: 38 U.S.C Sec 5313 (a), 38 C.F.R., Sec. 3.665 (a), (d), which reads as follows:

***If a Veteran is incarcerated as the result of a “felony” conviction as defined by law: “Any offense punishable by death or imprisonment for a term exceeding one year, unless specifically categorized as a misdemeanor under the law of the prosecuting jurisdiction.”***

***Then, the amount paid to a Veteran incarcerated for a service-connected disability is generally limited by law to the 10 percent disability rate, or half the amount of the ten percent rate if the Veteran’s disability rating is 10 percent. (If the Veteran is rated before incarceration as 20 percent disabled or higher, he will receive only the amount payable to a 10 percent disabled Veteran.) Incarcerated DIC recipients will receive one-half the amount paid to a Veteran receiving compensation payments for a 10 percent-rated disability.***

***A Veteran may not receive non-service connected VA pension benefits, or any portion of these benefits, while incarcerated for a felony or misdemeanor. However, his family may receive an apportionment of such benefits under the procedure described above. (See 38 C.F.R. Sec.3.666)***

There is a 60-day "grace period" following a conviction when you may still receive full benefits. To avoid an overpayment, it is important that you notify VARO immediately when you go to prison if you are receiving payments. If you do not notify the VA and receive overpayment, you and your family will lose all financial payments until the debt is paid.

*For example, Joe/Jane is a Veteran who receives a VA pension. He/she is convicted of a crime and is incarcerated, but doesn't tell the VA right away and keeps getting paid for 6 months. After serving his/her sentence of 18 months, he/she is released and applies to the VA to have his pension restarted. He/she will have an overpayment which must be recovered from the restarted benefits. Until the overpayment is recovered, Joe/Jane will have to go without that income.*

Your award for compensation or pension benefits should resume from the date you are released, as long as the VA receives notice of release within one year. Form 21-4193, Notice to Department of Veterans Affairs of Veteran or Beneficiary Incarcerated in Penal Institution, available through your counselors, should be completed before release, signed by a prison official and submitted to VA Benefits Administration.

## **Apportionment**

The Veteran can only receive a portion of the full amount payable for his or her disability rating; the remaining balance may be “apportioned to the individual’s dependent family”. To apply for apportionment, the Veteran must send a letter that identifies the Veteran and the apportionment claimant and makes it clear they are requesting an apportionment of his/her VA benefits to the VA Regional Office (VARO) that has jurisdiction over the Veteran’s case. VA regulations clearly specify this apportionment amount will only go to family members if they can show financial need for such amount. This applies to the spouse, children, or dependent parents who are involved in the application.

In deciding whether any apportionment is appropriate, the amount of the apportionment, and to whom it will go, the following factors are considered:

- The family member’s income and living expenses;
- The amount of compensation available to be apportioned;
- The needs and living expenses of other family members; and
- Special needs of any of the family members.

*For example: a Veteran incarcerated rated as 80 percent disability can only receive the amount he or she would get if he or she were 10 percent disabled. However, his or her family may be apportioned up to 70 percent, the difference of the 80 percent rating. (DIC may also be apportioned with similar restrictions.)* There is a 60-day “grace period” following conviction where the Veteran, or Dependency or Indemnity Compensation (DIC) recipient, may still receive full benefits. If the Veteran continues to receive benefits after the 60-day period, it will result in an “overpayment”. The VA considers it to be the recipient’s responsibility and fault if this occurs because the recipient failed to notify the VA of his or her incarceration. Attempts to obtain a waiver in these situations of overpayment are often unsuccessful. As a rule, the Veteran loses most, if not all, financial benefits until the VA recovers the entire overpayment. It has also been a standard procedure that the family will not be entitled to receive an apportionment until the debt is completely recovered.

For more information concerning VA debt collection rules that may affect the incarcerated Veteran, telephone: 1-800-827-1000 and request a Veterans Service Organization representative or, write to a Veterans Service Organization.

One other relevant restriction on Veteran’s incarcerated eligibility for service-connected disability compensation is that: “No total disability rating based on un-employability, may be assigned to an incarcerated Veteran”.

It is important to remember that most VA decisions, including those on apportionment, can be appealed to the Board of Veterans Appeals and, if need be, to the Court of Appeal for Veterans Affairs.

## **Re-starting Benefits at Release**

It is important that each disabled Veteran receiving compensation or DIC payments promptly notify VBA Regional Office. Regular full benefit payments should begin upon release provided the VA is notified of the Veteran’s release, including placement within a community treatment center or halfway house in the community, within one year of release. Notification of your incarceration and release from incarceration can be reported on VA Form 21-4193. This form

requires confirmation of the dates of incarceration to be completed by an official at the institution. The Transitional Case Management Program (TCMP) staff located at each of the state prisons possess the form and are authorized to assist you with completion of VA Form 21-4193 as you are preparing for release from incarceration. This form should be mailed to the VBA Regional Office found at the beginning of this section of the Guidebook.

## **Seeking Help after Release**

If you would like to get benefits or think you have a pending claim before the VA, it is best to get professional help to assist you.

Many Veterans Service Organizations (VSO's) have trained staff who can help you with your VA claim, and can legally represent your claim before the VA. Some also help homeless and at-risk Veterans find the support services they need. You can contact any VSO listed in the Guidebook to learn of an office near you.

## **Seeking Benefits On Your Own**

Although we encourage you to seek the aid of a service representative; you may choose to apply for VA benefits on your own. Write your local VA Regional Office or find the forms online at: [www.vba.va.gov/pubs/forms1.htm](http://www.vba.va.gov/pubs/forms1.htm). You can also apply for certain benefits online at: <http://vabenefits.vba.va.gov/vonapp/main.asp>.

Below are brief descriptions of forms needed to file for certain VA benefits. Be sure you use a return address where mail will get to you as quickly as possible. Make photocopies of all forms for your records before sending your packet to the VARO nearest you.

- VA Form 21-526 - Application for Compensation or Pension- must be filed to apply for compensation -or pension. Mail your DD-214 and the following forms to the VARO nearest your release destination 30 to 45 days before your release.
- VA Form 21-4138 - Statement in Support of Claim - lets you explain why you deserve the benefits you are asking for because of your disability or disorder. It is best to have an experienced service representative help you complete the form.
- VA Form 21-4142 - Authorization for Release of Information - If you have received medical or mental health care, that may be relevant to your claim, from anyone other than a VA Medical Facility, you need to fill out a VAF 21-4142 giving permission for release of medical records to the VA.
- VA Form 10-10EZ - Enrollment for Medical Benefits - is used by the VA to determine if you can receive medical benefits. Complete the form and bring it with you to the VA medical facility where you will seek evaluation for treatment.
- VA Form 28-1900 - Vocational Rehabilitation for Disabled Veterans - is needed to apply for the vocational rehabilitation program to help Veterans who were disabled during their service reach maximum independence in daily living, to learn the skills needed to get a job, and to find and keep a job. Send Form 28-1900 to the VARO in your area 10 to 15 day's before your release.

- VA Form 70-3288 - Request for and Consent to Release of Information from Claimant's Records - is used to get records relevant to your claim from VA facilities (regional offices, medical centers, outpatient clinics, and vet centers). Request a fee waiver under section 38 C.F.R. Sec.1.526 (h), which requires VARO to provide a Veteran with one set of his or her records free of charge.

## **Section V**

### **The State of California Veteran Benefits and Resources**

This section of the Guidebook is devoted to state benefits available through California Department of Veterans Affairs (CDVA). We would like to thank CDVA for providing this information for the Guidebook.

#### **Employment for Veterans**

##### **State Employment**

There are special provisions that allow veterans to receive preference in testing for open and non-promotional entrance examinations that requiring college graduation AND less than two years of experience. The examination will state whether or not veteran's preference credits will be granted.

In open examinations, eligible veterans, widows/widowers of veterans, and spouses of 100 percent disabled veterans receive 10 points. Eligible disabled veterans receive 15 points. In open non-promotional examinations, eligible veterans, widows/widowers of veterans, and spouses of 100 percent disabled veterans receive 5 points and eligible disabled veterans receive 10 points. No veteran's preference credits will be allowed once a veteran achieves permanent civil service status.

The points are added to the final score only after the candidate has successfully passed all parts of the examination.

To be eligible for veterans' preference credits, you must be qualified as a veteran by meeting the required definitions. "Veteran" means any person who has served full time for 30 days or more in the Armed Forces in time of war or in time of peace in a campaign or expedition for service in which a medal has been authorized by the government of the United States, or during the period of September 16, 1940, to January 31, 1995, or who has served at least 181 consecutive days since January 31, 1995, and who has been discharged or released under conditions other than dishonorable but does not include any person who served only in auxiliary or reserved components of the Armed Forces whose service therein did not exempt him or her from the operation of the Selective Training and Service Act of 1940.

"Disabled Veteran" means any veteran as defined herein who is currently declared by the VA to be 10 percent or more disabled as a result of his or her service' and "100 percent Disabled Veteran" means any veteran as defined herein who is currently declared by the VA to be 100 percent disabled as a result of his or her service. Proof of disability shall be deemed conclusive if it is of record in the VA.

To apply for veteran's preference credits, obtain from any State department testing office a copy of SPB Form 1093, "Application for Veterans Preference for California State Civil Service Examinations." A completed SPB Form 1093 along with a copy of military discharge papers (DD Form 214) should be sent to California Department of Human Resources:

California Department of Human Resources  
Attn: Exams  
1515 "S" Street, North Building, Suite 400  
Sacramento, CA 95811

If you have further questions concerning veterans' preference points, please contact the State Personnel board at (866) 844-8671.

### **Steps to Getting a State Job**

To be considered for state employment, you must create an account online. Please visit [www.jobs.ca.gov](http://www.jobs.ca.gov) and under "Sign In to My Profile" select "Create a new profile". After you've completed the registration process and safely stored your user ID and password for future use, you may complete an application, including your résumé. You may also find state exams and job vacancies by visiting [www.jobs.ca.gov](http://www.jobs.ca.gov).

### **Services for Veterans**

The Employment Development Department (EDD) assists veterans and their eligible spouses in maximizing their employment and training opportunities. Veterans are entitled to many resources designed to help in their search for employment. The EDD veterans' representatives specialize in assisting veterans in their efforts to return to work and are located in many local EDD offices. Services provided include a veteran 24-hour priority hold on all job listings, customized job search assistance, job fairs, employer recruitments, and other events and resources.

Veterans are encouraged to schedule an appointment with an EDD veterans' representative for personalized services and assistance to achieve professional goals.

To locate an EDD office near you call (877)-US2-JOBS or visit [http://edd.ca.gov/Office\\_Locator/](http://edd.ca.gov/Office_Locator/).

### **Vietnam Era Veterans' Readjustment Assistance Act**

Vietnam era veterans, special disabled veterans, and veterans who served on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized are protected in employment by the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended, 38 U.S.C. 4212.

The law requires that employers with Federal contracts or subcontracts of \$25,000 or more provide equal opportunity and affirmative action for Vietnam era veterans, special disabled veterans, and veterans who served on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized.

A Vietnam era veteran is a person who **(1)** served on active duty for a period of more than 180 days, any part of which occurred between August 5, 1964 and May 7, 1975, and was discharged or released with other than a dishonorable discharge; **(2)** was discharged or released from active duty for a service connected disability if any part of such active duty was performed between August 5, 1964 and May 7, 1975; or **(3)** served on active duty for more than 180 days and served in the Republic of Vietnam between February 28, 1961 and May 7, 1975.

A special disabled veteran is a person who is entitled to compensation under laws administered by the VA for a disability rated at 30 percent or more; or, rated at 10 or 20 percent, if it has been determined that the individual has a serious employment disability; or, a person who was discharged or released from active duty because of a service-connected disability.

As a part of affirmative action, Federal contractors and subcontractors are required to list with the local State employment service all employment openings except for executive and top management jobs; jobs which the contractor expects to fill from within; and jobs lasting 3 days or less.

If a covered veteran believes he/she has been discriminated against by a Federal contractor or subcontractor, he or she may file a complaint. Complaints may be filed with the Office of Federal Contract Compliance Programs (OFCCP) or through the local Veteran's Employment Representative at a local State employment service office.

If any covered veteran believes a contractor of the United States has failed to comply or refuses to comply with contract provisions relating to the employment of veterans, the veteran may file a complaint with the OFCCP.

For more information about VEVRAA, please visit <http://www.dol.gov/compliance/laws/comp-vevraa.htm> or call 1-800-397-6251. To locate your District or Area Office, please visit <http://www.dol.gov/ofccp/contacts/ofnation2.htm#California>.

### **The Disabled Veteran Business Enterprise (DVBE) Program**

Annually, the State of California contracts billions of dollars for goods and services to ensure California's economy stays healthy, strong, and prosperous and promotes business opportunities and participation for all of its citizenry. Small businesses, including veterans, disabled veterans, and disabled veteran business enterprises are instrumental to the good health of the State's economy and a principal source of new jobs in California.

Accordingly, the State of California established the Disabled Veteran Business Enterprise (DVBE) Program in 1989 under Public Contract Code 10115 to primarily help DVBEs compete more effectively for a portion of those dollars, and to promote self-reliance for California's disabled veterans by offering veterans the opportunity to gain experience in business, while sharing their expertise with the citizens of California and provide a goal of awarding 3% of all state contracts to certified DVBEs.

### **DVBE Eligibility Requirements**

To be eligible for certification the business must meet the following criteria:

- Must be at least 51% unconditionally owned by one or more disabled veterans or must be 100% unconditionally owned by one or more disabled veterans if the business is a Limited Liability Company.
- Have its daily operations managed and controlled by one or more disabled veterans; the disabled veteran(s) who manages & controls the business is not required to be the disabled veteran business owner(s).
- Have its home office located in the United States; and the office cannot be a branch or subsidiary of a foreign corporation, foreign firm or other foreign-based business.

### **How Do You Get Certified?**

The certification process is the responsibility of the Department of General Services (DGS), Procurement Division (PD), Office of Small Business and DVBE Services (OSDS). The OSDS is available to assist in completing the necessary documents and appointments are available in Sacramento for personal assistance. Most DVBEs (80%) also qualify for small business (SB) certification, which offers additional benefits. There is no cost involved with applying for DVBE or small SB certification. To obtain DVBE certification, a firm must:

- Submit a completed application, STD Form 812, found at the DGS website and
- Provide a copy of an Award of Entitlement (AOE) letter from the U. S. Department of Veterans Affairs or the U. S. Department of Defense, dated within six months of the date the application is submitted to OSDS. To obtain an AOE letter, you may call the U.S. Department of Veterans Affairs at (800) 827-1000.



Applicants are encouraged to register their business and complete the certification application on-line. Using the on-line system, SBs may receive immediate certification. Prospective DVBEs will be prompted to send eligibility documentation. For certification assistance, call the OSDS during regular State business hours at (916) 375-4940.

### **Certification Benefits**

- State agencies are required to award at least 25% of their annual contracting dollars to certified SBs and at least 3% to DVBEs.
- State agencies may give a 5% bid preference to certified SBs and may offer up to a 5% DVBE bid incentive.
- As a certified DVBE and/or SB, your business is added to the DGS' data-base which State agencies use to find DVBEs and SBs.
- Ability to participate in streamlined procurements known as SB/DVBE Options. Contracts awarded using the SB/DVBE Option are valued from \$5,000.01 to \$249,999.99 for goods, information technology, and services (or valued up to \$250,000 for public works contracts). This option enables State agencies to contract directly with certified businesses when they obtain price quotations from at least 2 responsible and responsive SBs or at least 2 responsible and responsive DVBEs.

Office of Small Business and DVBE Services  
707 3rd Street, 1st Floor, Room 400  
West Sacramento, CA 95605  
(916) 375-4940 or [OSDSHelp@dgs.ca.gov](mailto:OSDSHelp@dgs.ca.gov)

### **Business License, Tax, and Fee Waiver**

Waiver of municipal, county and state business license fees, taxes and fees, for veterans who hawk, peddle or vend any goods, wares or merchandise owned by the veteran, except spirituous, malt, vinous or other intoxicating liquor, including sales from a fixed location.

### **Who May Be Eligible**

Honorably discharged veterans who engage in sales (not services) activities may be eligible. Eligibility criteria differ based upon local jurisdiction.

### **How to Apply**

Bring proof of honorable discharge to your local appropriate county/city licensing authority.

### **CalVet Home Loans**

CalVet has expanded eligibility so that most honorably discharged veterans and active duty service members wanting to buy a home in California are eligible.

CalVet offers loans on:

- Single Family Homes, Condos, Co-ops, and Mobile Homes on land for up to \$521,250
- Loans on mobile homes in a park for up to \$175,000 (rate is an additional 1%)
- Farm loans for up to \$675,000
- Home Improvements Loans for up to \$150,000
- Rehabilitation Loans for those houses not up to VA standards
- Construction Loans

For more information call (866) 653-2510 or email [loanapps@calvet.ca.gov](mailto:loanapps@calvet.ca.gov)

### **Property Tax Exemptions**

California has two separate property tax exemptions: one for veterans and one for disabled veterans.

#### **Veterans Exemption**

The California Constitution provides a \$4,000 real property (for instance, a home) or personal property (for instance, a boat) exemption for honorably discharged veterans or the spouse or pensioned parent of a deceased, honorably discharged veteran. Most persons, however, are disqualified from this exemption due to restrictions on the value of property a claimant may own. A person who owns property valued at \$5,000 or more (\$10,000 or more for a married couple or for the unmarried surviving spouse of a qualified veteran) is not eligible for this exemption. Thus, a veteran who owns a home would most likely not qualify for the veterans' exemption.

#### **Disabled Veterans' Exemption**

The California Constitution and Revenue and Taxation Code Section 205.5 provide a property tax exemption for the home of a disabled veteran or an unmarried spouse of a deceased disabled veteran.

There is a basic \$100,000 exemption or a low-income (less than \$52,470) \$150,000 exemption available to a disabled veteran who, because of an injury incurred in military service, is:

- is blind in both eyes, or
- has lost the use of two or more limbs, or
- is totally disabled as determined by the VA or by the military service from which the veteran was discharged.

An unmarried surviving spouse may also be eligible if the service person died as the result of a service-connected injury or a disease incurred while on active duty in the military. In other words, a veteran may not have been eligible during his or her lifetime, but the surviving spouse may become eligible for the exemption upon the veteran's death.

Unlike the veterans' exemption, the disabled veterans' exemption has no personal wealth cap requirements. The exemption is only available on a veteran's principal place of residence. The home may only receive one property exemption. Thus, if a homeowners' exemption has been granted on a property and the owner subsequently qualifies for the disabled veterans' exemption, the homeowners' exemption should be cancelled to allow for the disabled veterans' exemption as it provides the greater benefit.

The issues regarding these exemptions are complex, and the eligibility requirements are specific. Your local assessor's office should be consulted for detailed requirements regarding these exemptions.

*Note: Both exemption amounts are annually adjusted for cost of living index; as of January 1, 2013, the exemption amounts are \$122,128 and \$183,193 respectively.*

### **How Do I Apply?**

Eligible veterans or surviving spouses may apply for an exemption at their local County Assessor's Office. County Assessor's Office may be found in the county government section of your telephone book or at [www.boe.ca.gov/proptaxes/assessors.htm](http://www.boe.ca.gov/proptaxes/assessors.htm).

### **The Veterans Homes of California**

CalVet currently operates six Veterans Home campuses. Two additional campuses will open soon. These Homes provide live-in, residential, and long-term health care services including medical, dental, pharmacy, rehabilitative and social services in an environment that promotes dignity and individualized care.

The Veterans Homes range in size from 60 residents on 20+ acre campuses to over 1,000 residents on a 500 acre campus. Each Home is distinctive within its region and offers its own unique environment, levels of care combinations and a range of social and recreational activities. The levels of care include skilled nursing facility (SNF), intermediate care facility (ICF), residential care for the elderly or assisted living (RCFE), domiciliary or independent living (DOM), adult day health care (ADHC) and dementia or memory care.

### **Basic Admission Requirements**

Veterans who are age 55 and above are eligible to apply for admission. The age requirement is waived for disabled or homeless veterans needing long-term care. You must also meet the following requirements:

1. Served on active duty in the Armed Forces of the United States, for other than training purposes, during wartime or peacetime.
2. Provide proof of military service by submitting a DD 214, or obtaining proof through the U.S. Department of Defense (DOD) or the United States Department of Veterans Affairs (USDVA).
3. Discharged or released from active duty honorably or under honorable conditions.
4. California resident at the time of application for admission.

Note: Medal of Honor recipients, Ex-POW's and wartime veterans are given priority for admission over peacetime veterans.

### **Additional Requirements, Applicants must:**

1. Test negative for Tuberculosis (TB).
2. Not require more care and supervision than provided at the Veterans Home of choice.
3. Not require acute hospitalization at the time of application.
4. Not have a primary need for acute psychiatric care.
5. Not have a past history of violence, mental illness, or a criminal record that would create a risk to yourself or other residents of the Veterans Home of California.
6. Not be under the influence of alcohol or illegal substances.
7. Be enrolled in a qualified federal, state, or private health insurance plan, or have an application for such a plan pending.

Applications for the Homes can be obtained through your County Veterans Service Office, or online at <http://www.calvet.ca.gov/VetHomes/Admissions.aspx>.

### **Current Veterans Homes of California**

Veterans Home of California at Yountville 260 California Drive Yountville, CA 94599 Phone: (800) 404-8387	Veterans Home of California at Ventura 10900 Telephone Road, Ventura, CA 93004 Phone: (888) 272-2104	Veterans Home of California at Barstow 100 East Veterans Parkway Barstow, CA 92311 Phone: (800) 746-0606
William J. "Pete" Knight Veterans Home of California at Lancaster 45221 30 <sup>th</sup> Street West Lancaster, CA 93536 Phone: (888) 270-6030	Veterans Home of California at West Los Angeles 11500 Nimitz Avenue Los Angeles, CA 90049 Phone: (877) 605-1332	Veterans Home of California at Chula Vista 700 East Naples Court Chula Vista, CA 91911 Phone: (888) 857-2146

### **Future Veterans Homes of California**

Veterans Home of California at Redding 3400 Knighton Road Redding, CA 96002 Phone: (855) 769-5791	Veterans Home of California at Fresno 2811 West California Avenue Fresno, CA 93706 Phone: (855) 769-5792	
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### **The Pathway Home Program Offered by the Veterans Home at Yountville**

The Pathway Home Program (PHP) is a residential recovery program specifically created for, and dedicated to serve, our Nation's "New Warriors"—those of any age, who have served our Nation's Global War on Terror in areas of the world such as Afghanistan and Iraq. The program helps veterans address their problems and maximize their mental and physical health, coping, resiliency, and overall functioning – whether during post-deployment, re-deployment, or when transitioning back to their civilian status. The program provides a variety of residential treatments for combat and other military-related stressors that are done in group format lead by healthcare professionals and with the support of other PHP residents. Each resident plays an important part in working with staff to develop his/her individual treatment plan. For an application and eligibility information, please visit [www.thepathwayhome.org](http://www.thepathwayhome.org).

### **College Tuition Fee Waiver for Veterans' Dependents**

Waives mandatory system-wide tuition and fees at any State of California Community College, California State University, or University of California campus. This program does not cover the expense of books and parking.

### **Who is Eligible?**

#### **Plan A**

- The child of a veteran who is totally disabled due to service-connected disabilities, or whose death was officially rated as service-connected is eligible. The child must be over 14 years old and under 27 years old. If the child is a veteran, then the age limit is extended to age 30.
- The spouse or Registered Domestic Partner (RDP) of a wartime veteran who has been rated as service-connected totally disabled or whose death has been rated as service-connected (Note that there are no age limit restrictions).
- Any dependent of any veteran who has been declared missing in action, captured in the line of duty by hostile forces, or forcibly detained or interned in the line of duty by a foreign government or power.

## **Plan B**

A child of a veteran who has a service-connected disability, or had a service-connected disability at the time of death, or died of service-related causes is eligible. The child's "annual income," which includes the child's adjusted gross income, plus the value of support provided by a parent, may not exceed the "annual income limit." The current academic year entitlement is based upon the previous calendar year's "annual income."

To view this year's poverty level, please visit:

<http://www.calvet.ca.gov/VetServices/CollegeFeeWaiver.aspx>

*Note: All students must meet California residency requirements as determined by the institution of higher education.*

## **How Do I Apply?**

Contact your local County Veterans Service Office (CVSO) or the Admissions Office of any California system campus. You may also go to [www.cacvso.org](http://www.cacvso.org) or <http://www.calvet.ca.gov/VetServices/CollegeFeeWaiver.aspx> for more information and to download an application.

## **Non-Resident College Fee Waiver**

Waives non-resident fees (pay at the California resident rate) at all State of California Community Colleges, California State University, or University of California campuses for the length of time required to become a California resident for tuition purposes..

## **Who is Eligible?**

- A student who is a veteran of the Armed Forces of the United States that is stationed in California while on active duty for more than one year immediately prior to separation would be eligible to qualify. The veteran is entitled to the resident classification for the length of time immediately following discharge for the minimum time necessary to become a resident. **NOTE:** Veterans who leave the state for more than one year following discharge are no longer eligible, and would be subject to out of state fees. However, please be aware that any non-temporary absence from California or conduct inconsistent with a claim of California residence during the one-year waiver period, such as maintaining voter registration and voting in another state or declaring non-residence for California income tax purposes, may result in the student not qualifying as a California resident for tuition purposes after the end of the one-year waiver period.
- An undergraduate student who is a member of the Armed Forces of the United States stationed in California on active duty, except a member of the Armed Forces assigned for educational purposes to a state-supported institution of higher education.
- An undergraduate student who is a natural or adopted child, stepchild, or spouse who is a dependent of a member of the armed forces of the United States stationed in California on active duty.
- A student seeking a graduate degree who is a member of the Armed Forces of the United States stationed in California on active duty, except a member of the Armed Forces assigned for educational purposes to a state-supported institution of higher education. There is a two-year limit for graduate level studies.
- A student seeking a graduate degree who is a natural or adopted child, stepchild, or spouse who is a dependent of a member of the armed forces of the United States stationed in this state on active duty. There is a one-year limit for graduate level studies.

**How Do I Apply?**

At the Admissions Office of any State of California Community Colleges, California State University, or University of California campuses.

**Veterans' License Plate Program**

Available to all California motorists, these special California license plates may be ordered with the armed force or veterans' service organization logo/emblem of your choice. Over 100 insignias are available, and your logo will be prominently displayed to the left of a six number/letter combination. Sequential plates have an initial cost of \$50, and have a \$40 yearly renewal fee (this may be a tax-deductible contribution and is in addition to normal DMV license fees). You may also "personalize" your veterans' license plate (your choice of up to 6 characters) for an initial cost of \$78 and a yearly renewal fee of \$40. All proceeds from the sale of veterans' plates are used to expand veteran services statewide.

**How to Apply**

Information on how to obtain Veterans plates can be obtained from your local County Veterans Service Office, DMV office or by calling the CalVet at (916) 653-2573. DMV License Plate website at <http://dmv.ca.gov/ipp2/welcome.do?localeName=en>.

**Special License Plates for California Veterans**

California also offers special license plates to honor the service of the following veterans:

**Medal of Honor**

Medal of Honor recipients are eligible for one set of free commemorative license plates.

**Legion of Valor**

Veterans who are Medal of Honor recipients, Army Distinguished Service Cross, the Navy Cross, or the Air Force Cross are eligible for special Legion of Valor license plates.

**Former Prisoners of War**

Former American Prisoners of War are eligible for one set of free commemorative license plates.

**Pearl Harbor Veterans**

An honorably discharged veteran who was stationed at Pearl Harbor on December 7, 1941, is eligible for special Pearl Harbor Survivor plates.

**Purple Heart**

Any veteran who is a Purple Heart recipient is eligible for special Purple Heart plates.

**How to Apply:**

Recipients should complete a DMV Form REG 17A, and provide proof they received one of the aforementioned medals or evidence of being stationed at Pearl Harbor on December 7, 1941. Former POWs will need to complete DMV Form REG 17.

Applications and necessary documentation should be mailed to:

Department of Motor Vehicles  
P.O. Box 932345  
Sacramento, CA 94232

Please call the DMV at (800) 777-0133 or visit their website [www.dmv.ca.gov](http://www.dmv.ca.gov)

**Note:** Those veterans with a Medal of Honor, Legion of Valor, Former Prisoner of War, Pearl Harbor, or Purple Heart license plate may park his or her motor vehicle, weighing not more than 6,000 pounds gross weight, without charge, in a metered parking space. This does not exempt a vehicle with the aforementioned license plates from complying with any other state law or ordinance.

### **Gold Star License Plates**

“Gold Star Family” license plates are available to families free of charge who want to honor loved ones lost during service to their country.

**NOTE:** The plates must be assigned to a California-registered vehicle owned by the qualified family member. Gold Star Family License Plates are only available as sequential plates through DMV headquarters.

### **How to Apply:**

Each qualified family member who applies for a Gold Star Family License Plate is required to submit original copies of the following completed and signed forms:

1. Project Gold Star License Plate Application
2. Special License Plate Application (REG 17A)
3. Report of Casualty (DD 1300) from the Department of Defense

The Project Gold Star License Plate Application must be certified by a CVSO. To locate your local CVSO please visit their website at [www.cacvso.org](http://www.cacvso.org).

Department of Motor Vehicles  
Special Processing Unit  
PO Box 932345 MS D238  
Sacramento, CA 94232

### **Disabled Veterans (DV)**

Service-connected disabled veterans with any of the conditions listed below may receive, free of charge, a set of special "DV" plates which permit free parking at all parking meters in the state with no time limit, and allows for parking in handicapped zones. VA proof of service connection is required and the service-connected disability must, according to California Vehicle Code Section 295.7, be identified as one of the following:

- Rated at 100% disabled by the Department of Veterans Affairs or the military service from which the veteran was discharged, due to a diagnosed disease or disorder which substantially impairs or interferes with mobility; or,
- Is so severely disabled as to be unable to move without the aid of an assistive device; or,
- Have lost the use of one or more limbs; or,
- Have suffered permanent blindness as defined in Section 19153 of the Welfare and Institutions Code.

### **How to Apply**

Complete DMV form REG 256A, and have it signed off by a VA Official which indicates that you have a service-connected disability with at least one of the above listed mobility impairments.



Then mail the completed form to:

DMV PLACARD  
Special Processing Unit, MS D238  
P.O. Box 932345  
Sacramento, CA 94232-0001  
(800) 777-0133  
[www.dmv.ca.gov](http://www.dmv.ca.gov)

### **Fishing and Hunting Licenses**

This benefit reduces annual fees for fishing and hunting licenses for disabled veterans

#### **Who May Be Eligible**

Any veteran with a 50% or greater service-connected disability.

#### **How to Apply**

First time applicants must submit proof of their service-connected disability from the USDVA.

The California Department of Fish and Game  
License and Revenue Branch  
1740 N. Market Blvd.  
Sacramento, CA 95834  
Phone: (916) 928-5805  
[www.dfg.ca.gov](http://www.dfg.ca.gov)

### **State Parks and Recreation Pass**

The Distinguished Veteran Pass is a lifetime State of California Parks Pass that entitles the holder to the use of all basic State Park System operated facilities, including camping and day use, at no further charge. The pass is not valid at units operated by local government, private agencies, or concessionaires and it is not valid for special events, group campsites, and commercial use or for supplemental fees and cannot be used in conjunction with any other pass and/or discount.

#### **Who May Be Eligible**

Any war veteran (as defined in Public Resources Code section 5011.5) with a service-connected disability rated at 50% or greater, a Congressional Medal of Honor Recipient, or a former Prisoner of War. You must be a California resident to qualify for this pass.

#### **How to Apply**

To apply by mail, a veteran should submit: (1) a completed [Department of Parks and Recreation form DPR 619 \(Excel Document\)](#), (2) a letter from the USDVA verifying a service-connected disability rated at 50% or greater, or former Prisoner of War status, or evidence of the Medal of Honor award (3) a copy of the veterans drivers license to verify California residency.

Park Pass Sales Office  
1416 9th Street, Room 144  
Sacramento, CA 95814  
(916) 653-8280  
<http://www.parks.ca.gov/>



**California State Veterans Cemetery**

The Northern California Veterans Cemetery (NCVC) is the first state-owned and operated veterans cemetery in the Golden State. The cemetery serves the veteran population in eighteen Northern California counties and the currently developed area of the cemetery provides sufficient burial space for more than thirty years. Beyond that, the cemetery has the capacity for expansion. Any eligible veteran, along with spouses and eligible dependents, may be interred at the cemetery (see Eligibility Requirements).

**Who May Be Eligible**

The Department of Veterans Affairs has adopted Sections 460 and 461 of Title 12 of the California Code of Regulations. These regulations establish the eligibility requirements for interment in a state veteran's cemetery. The regulations would make the state eligibility requirements for burial in a state veteran's cemetery equivalent to the requirements for burial in a national cemetery and provide for the Department's collection of information in order to determine eligibility.

Pre-need determination allows a veteran to establish in advance, his/her eligibility for interment at the Northern California Veterans Cemetery. There is no cost for pre-need determination, and it does not obligate the veteran to be interred at the cemetery. Pre-need determination is intended to simplify and assist the veteran's next-of-kin at the time of death.

Eligibility determinations shall be made in accordance with federal regulations (38 CFR 38.620) and state regulations (CCR Title 12 Sec. 460-461).

There will be a \$500 interment fee for eligible spouses and dependent children at the time of need. Associated funeral expenses are incurred by the veteran and/or family.

Northern California Veterans Cemetery  
P.O. Box 76  
11800 Gas Point Road  
Igo, CA 96047  
(866) 777-4533

## **California County Veterans Service Officers**

The California Association of County Veterans Service Officers (CACVSO) is an organization of professional veterans' advocates. In California, the County Veterans Service Officer (CVSO) plays a critical role in the veteran's advocacy system and is often the initial contact in the community for veterans' services. Through the CVSO, the CACVSO is committed to providing a vital and efficient system of services and advocacy to veterans, their dependents and survivors.

The CACVSO promotes state and federal legislation and policy supportive of veterans' rights and issues, in harmony with our national obligation to veterans of the Armed Forces of the United States. The association provides a medium for the exchange of ideas, information, training, and support to facilitate delivery of services to nearly three million California veterans.

The CACVSO recognizes the importance and merit of the congressionally-chartered veterans' service organizations, and is committed to fostering a mutually beneficial relationship with them for the common good of all veterans. It is the intent of this organization that every veteran residing in California receives the benefits and services in which they are entitled to by law.

### **A Veteran Service Office can assist you if you are a:**

- Veteran
- Widow of a veteran
- Child of a deceased or disabled veteran
- Parent who lost a son or daughter in military service

### **And you have questions about:**

- Compensation
- Pension
- Education benefits
- Life Insurance
- Healthcare benefits
- Home loans
- California veterans state benefits
- Burial benefits
- Discharge upgrade

### **Or Need a referral for:**

- Post-Traumatic Stress Disorder Treatment
- Hospitalization
- Outpatient medical and dental treatment
- Alcohol and drug dependency treatment
- Home loans
- Small Business Administration

### **Services Offered Include:**

- Claims assistance
- Client advocacy
- Case maintenance
- Information and referral

### **Program liaison with:**

- VA healthcare services
- VA veterans' centers

- VA regional offices
- Veterans service organizations
- CalVet Farm and Home Loan assistance
- Outreach to the elderly, disabled, Vietnam era veterans, the incarcerated, minorities, and women

### Veteran Service Offices by County

<b>Alameda CVSO</b> 6955 Foothill Blvd., Suite 300 Oakland, CA 94605 510-577-1926 Mon—Fri 9:00am-5:00pm	24100 Amador St., 3rd Floor Hayward, CA 94544 510-265-8271 Tues—Thur 9:00am-12:00pm, 1:00pm-5:00pm	4951 Arroyo Rd. Livermore, CA 94550 By Appointment Only, Call 510-577-1926
39155 Liberty St., Suite F620 Fremont, CA 94538 510-795-2686 Tues, Thur, and Fri 9:00am-12:00pm, 1:00pm-5:00pm	<b>Amador CVSO</b> 1141 American Legion Way Jackson, CA 95642 209-267-5764 Mon-Fri 7:30am-4:30pm	<b>Butte CVSO</b> 2445 Carmichael Dr. Chico, CA 95928 530-891-2759 Mon-Fri 8:00am-4:00pm
<b>Calaveras CVSO</b> 509 East Saint Charles St. San Andreas, CA 95249 209-754-6624 Mon-Fri 9:00am-4:00pm	<b>Colusa CVSO</b> 901 Parkhill St. Colusa, CA 95932 530-458-0494 Mon-Fri 8:30am-5:00pm	<b>Contra Costa CVSO</b> 10 Douglas Dr., #100 Martinez, CA 94553 925-313-1481 Mon-Fri 9:00am-12:00pm, 1:00pm-4:00pm
100-37th St., #1003 Richmond, CA 94805 Tues 9:00am-12:00pm, 1:00pm-4:00pm	400 Hartz, #208 Danville, CA 94526 925-313-1481 By Appointment Only, Wednesday 10:00am-2:00pm	400 Hartz, #208 Danville, CA 94526 925-313-1481 By Appointment Only, Wednesday 10:00am-2:00pm
<b>Del Norte CVSO</b> 810 H Street Crescent City, CA 95531 707-454-2154 707-465-0409 Mon-Fri 8:00am-12:00pm, 1:00pm-5:00pm	<b>El Dorado CVSO</b> 130 Placerville Dr., Suite B Placerville, CA 95667 530-621-5892 Mon-Fri 8:00am-5:00pm	Senior Center South Lake Tahoe, CA 96150 530-573-3134 Tues 9:30am-3:30pm
<b>Fresno CVSO</b> 3845 N. Clark, Suite 103 Fresno, CA 93726 559-600-5436 Mon-Thurs 8:00am-4:00pm, Fri 8:00am-12:00pm	<b>Glenn CVSO</b> 525 W. Sycamore St., Suite A5 Willows, CA 95988 530-934-6524 Mon-Fri 8:00am-5:00pm	<b>Humboldt CVSO</b> 825 5th St., Room 310 Eureka, CA 95501 707-445-7611 Mon-Fri 8:30am-12:00pm, 1:00pm-4:00pm
<b>Humboldt CVSO</b> 825 5th St., Room 310 Eureka, CA 95501 707-445-7611 Mon-Fri 8:30am-12:00pm, 1:00pm-4:00pm <b>Kern CVSO</b> 1120 Golden State Ave. Bakersfield, CA 93301 661-868-7300 Mon-Fri 8:00am-5:00pm	<b>Humboldt CVSO</b> 825 5th St., Room 310 Eureka, CA 95501 707-445-7611 Mon-Fri 8:30am-12:00pm, 1:00pm-4:00pm 400 North China Lake Blvd. Ridgecrest, CA 93555 760-375-1564 ext. 226 Wed 10:00am-3:00pm	<b>Inyo CVSO</b> County Services Building 207 West South Street Bishop, CA 93514 760-873-7850 Mon-Thurs 7:00am-5:00pm 750 Lake Isabella Blvd. Lake Isabella, CA 93240 1 <sup>st</sup> and 3 <sup>rd</sup> Thurs of the month 9:00am-12:00pm

<b>Kings CVSO</b> 1400 W. Lacey Blvd County Government Center Law Bldg. #4 Hanford, CA 93230 559-852-2659 Mon-Fri 8:00am-5:00pm	<b>Lake CVSO</b> 255 North Forbes St. Lakeport, CA 95453 707-263-2384 Mon-Fri 8:00am-12:00pm, 1:00pm-5:00pm	VA Clinic 15145 Lakeshore Dr. Clearlake, CA 95422 707-994-7200 Mon-Wed 8:00am-4:30pm
<b>Lassen CVSO</b> Veterans Memorial Building 1205 Main St. Susanville, CA 96130 530-251-8192 530-252-4988 Mon-Thur 8:00am-1:00pm Open every other Friday and Saturday 8:00am-5:00pm	<b>Los Angeles CVSO</b> 2615 S. Grand Ave., Suite 100 Los Angeles, CA 90007 213-744-4825	351 E. Temple St., Room B-307 Los Angeles, CA 90012 213-253-2677 ext. 4605
11301 Wilshire Blvd. Bldg. 206, Room B-29 Los Angeles, CA 90073 310-478-3711 ext. 48425	5730 Uplander Way, Suite 100 Culver City, CA 90230 310-641-0326	17600 "B" Santa Fe Ave. Rancho Dominguez, CA 90221 310-761-2221 Mon, Tues, Thur, and Fri only
Villages at Cabrillo 2001 River Ave. Long Beach, CA 90810 562-388-8008 Wed only	1427 West Covina Pkwy West Covina, CA 91790 626-813-3402	Sepulveda VA Bldg. 22, Room 218 16111 Plummer St. Sepulveda, CA 91343 818-891-7711 ext. 9146
335 E. K-10 Lancaster, CA 93535 661-974-8842	Santa Clarita Valley Service Cnt. 24271 Main St. Newhall, CA 91321 661-254-3413 Thur and Fri	Antelope Valley Senior Center 777 Jackman St. Lancaster, CA 93534 661-726-4410 Mon-Wed
Chatsworth Veteran Center 20946 Devonshire St., Suite 101 Chatsworth, CA 91311 818-576-0201	5901 E. 7th St., Room 217 Long Beach, CA 90822 562-826-8000 ext. 4657	769 W. 3rd St., San Pedro, CA Fridays only
<b>Madera CVSO</b> 200 W. Fourth St Madera, CA 93637 559-674-7766 Mon-Fri 8:00am-5:00pm	Oakhurst CBOC 40597 West Lake Dr. Oakhurst, CA 93644 559-683-5300 3 <sup>rd</sup> Thurs of the month	<b>Marin CVSO</b> 10 North San Pedro Rd., Suite 1010 San Rafael, CA 94903 415-499-6193 Mon-Thur 8:30am-4:00pm
<b>Mariposa CVSO</b> 5085 Bullion St. Mariposa, CA 95338 209-966-3696 Tues and Wed 9:00am-5:00pm	<b>Mendocino CVSO</b> 405 Observatory Ave. Ukiah, CA 95482 707-463-4226 Mon-Fri 8:00am-12:00pm, 1:00pm-5:00pm	360 N. Harrison St. Fort Bragg, CA 95437 707-964-5823 Thurs and Fri 8:00am-12:00pm

189 N. Main St. Willits, CA 9590 707-456-3792	<b>Merced CVSO</b> 3376 N. Hwy 59, Suite D Merced, CA 95341 209-385-7588 Mon-Fri 8:00am-5:00pm	<b>Modoc CVSO</b> 211 E. First St. Alturas, CA 96101 530-233-6209 Mon-Thurs 9:00am-12:15pm, 1:00pm-4:00pm, Closed Friday
<b>Mono CVSO</b> County Services Building 207 West South Street Bishop, CA 93514 760-873-7851	<b>Monterey CVSO</b> 1200 Aguajito Rd., Room 003 Monterey, CA 93940 831-647-7613 Mon-Fri 8am-12pm, 1pm-5pm	3401 Engineer Ln. Seaside, CA 93955 Call for hours
1000 S. Main St., Suite 209A Salinas, CA 93901 Call for hours	522 N. 2nd St. King City, CA 93930 Call for hours	649 San Benito St. Hollister, CA 95023 Call for hours
<b>Napa CVSO</b> 900 Coombs Suite 257 Napa, CA 94559 707-253-6072 Mon-Fri 8:00am-5:00pm	<b>Nevada CVSO</b> 255 South Auburn St. Grass Valley, CA 95945 530-273-3396 Mon-Fri 8:00am-5:00pm	<b>Orange CVSO</b> County Operations Center 1300 S. Grand Ave., Bldg. B Santa Ana, CA 92705 714-480-6555 Mon, Wed, Thur, Fri 8:00am- 4:00pm, Tues 9:30am-4:00pm
<b>Placer CVSO</b> 1000 Sunset Blvd., Suite 115 Rocklin, CA 95765 916-780-3290 Mon-Fri 8:00am-12:00pm, 1:00pm- 5:00pm	<b>Plumas CVSO</b> Health & Human Services Office 270 County Hospital Rd., Suite 206 Quincy, CA 95971 530-283-6275 Mon-Fri 8:00am-5:00pm	<b>Riverside CVSO</b> 4360 Orange St. Riverside, CA 92501 951-276-3060 Mon-Thur 9:00am-5:00pm
44-199B Monroe St. Indio, CA 92201 760-863-8266 Mon-Thur 8:00am-5:00pm	749 N. State Street Hemet, CA 92543 951-766-2566 Mon-Thur 8:00am-12:00pm, 1:00pm-5:00pm	<b>Sacramento CVSO</b> 2007 19th St. Sacramento, CA 95818 916-874-6811 Mon-Fri 8:00am-12:00pm, 1:00pm- 4:00pm
2433 Marconi Ave. Sacramento, CA 95821 916-874-6811 916-875-3670 Mon-Fri 8:00am-5:00pm	<b>San Benito CVSO</b> 300 West St. Hollister, CA 95023 831-636-4390 Mon, Wed, Fri 8:00am-12:00pm, Tue & Thur 1:00pm-5:00pm	<b>San Bernardino CVSO</b> 175 West 5th t., 2nd Floor San Bernardino, CA 92415 909-387-5516 Mon-Thur 8:30am-4:30pm, Fri 8:00am-4:00pm
8575 Haven Rancho Cucamonga, CA 909-948-6420 Mon-Thur 8:30am-4:30pm	56357 Pima Trail Yucca Valley, CA 92284 760-228-5234 Tues 9:00am-3:00pm	Village Center Bldg 1551 MCAGCC Twenty-nine Palms, CA 92277 Wed-Thur 8:00am-4:00pm
15900 Smoketree Hesperia, CA 92345 760-995-8010 Mon-Thur 8:30am-4:30pm	73629 Sun Valley Dr. Twenty-nine Palms, CA 92277 Wed 8:00am-4:00pm	<b>San Diego CVSO</b> 5560 Overland Dr., Suite 310 San Diego, CA 92123 858-694-3222 Mon-Fri 8:00am-4:00pm

Oceanside VA Clinic 1300 Rancho DeOro, Room 138 Oceanside, CA 92056 760-643-2049 760-643-4682 Mon-Fri 8:00am-4:00pm	San Marcos Vet Center 1 Civic Center Dr., Suite 150 San Marcos, CA 92069 855-898-6050 Wed 8:00am-3:00pm	Escondido Veterans Services 247 S. Kalmia St. Escondido, CA 760-480-1124 Mon-Fri 9:00am-3:00pm
VAMC, La Jolla VA Transition Center 3350 La Jolla Village Dr. San Diego, CA 92161 858-552-8585 ext. 1813	Chula Vista Veterans Home 700 East Naples Ct., Room A-159 Chula Vista, CA 91911 619-482-6010	Escondido VA Clinic 815 E. Pennsylvania Ave. Escondido, CA 92025 760-466-7020 Tue-Thur 8:00am-4:30pm
VAMC, La Jolla VA Transition Center 3350 La Jolla Village Dr. San Diego, CA 92161 858-552-8585 ext. 1813	Chula Vista Veterans Home 700 East Naples Ct., Room A-159 Chula Vista, CA 91911 619-482-6010	Escondido VA Clinic 815 E. Pennsylvania Ave. Escondido, CA 92025 760-466-7020 Tue-Thur 8:00am-4:30pm
Chula Vista Vet Center 180 Otay Lake Rd., Suite 108 Bonita, CA 91902 877-618-6534 Fri 7:00am-4:00pm	<b>San Francisco CVSO</b> 27 B Van Ness Ave San Francisco, CA 94102 800-807-5799 415-503-2000 Mon-Thur 9:00am-12:00pm, 1:00pm-4:00pm	<b>San Joaquin CVSO</b> 105 S. San Joaquin St. Stockton, CA 95202 209-468-2916 Mon-Fri 8:00am-5:00pm
<b>San Luis Obispo CVSO</b> 801 Grand Ave. San Luis Obispo, CA 93408 805-781-5766 Mon-Fri 8:00am-5:00pm	<b>San Mateo CVSO</b> 400 Harbor Blvd., Bldg. B Belmont, CA 94002 650-802-6598 Mon-Fri 8:00am-5:00pm	<b>Santa Barbara CVSO</b> 511 E. Lakeside Pkwy Santa Maria, CA 93455 805-346-7160 Mon-Fri 7:30am-4:30pm
315 Camino Del Remedio, Bldg. 2, Room 251 Santa Barbara, CA 93110 805-681-4500 Mon-Fri 7:30am-11:00am, 2:00pm- 4:30pm	401 E. Cypress, Room 101 Lompoc, CA 93436 805-737-7900 Mon-Fri 7:30am-12:00pm, 1:00pm- 4:30pm	<b>Santa Clara CVSO</b> 68 N. Winchester Blvd. Santa Clara, CA 95050 408-553-6000 Mon-Fri 8:00am-12:00pm, 1:00pm- 4:00pm
<b>Santa Cruz CVSO</b> 1400 Emerline Ave., Bldg K, 3rd Floor Santa Cruz, CA 95060 831-454-4761 Mon-Fri 8:00am-12:00pm, 1:00pm- 5:00pm	215 E. Beach St. Watsonville, CA 95076 831-454-4761 Thursdays by appointment only	<b>Shasta CVSO</b> 1855 Shasta St. Redding, CA 96001 530-225-5616 Mon-Fri 8:00am-12:00pm, 1:00pm- 5:00pm
<b>Siskiyou CVSO</b> 105 E. Oberlin Rd. Yreka, CA 96097 530-842-8010 Mon-Thur 8:00am-12:00pm, 1:00pm-5:00pm	<b>Solano CVSO</b> 675 Texas St., Suite 4700 Fairfield, CA 94533 707-784-6590 Mon-Fri 9:00am-12:00pm, 1:00pm- 4:00pm	<b>Sonoma CVSO</b> 3725 Westwind Blvd., Suite 101 Santa Rosa, CA 95402 707-565-5960 Mon-Thur 9:00am-4:00pm Drop-in's on Friday
<b>Stanislaus CVSO</b> 121 Downey Ave., Suite 102 Modesto, CA 95354 209-558-7380 Mon-Fri 8:00am-4:30pm	<b>Tehama CVSO</b> 633 Washington St., Room 15 Red Bluff, CA 96080 530-529-3664 Mon-Thurs 12:00pm-4:00pm	<b>Trinity CVSO</b> 100 Memorial Dr. Weaverville, CA 96093 530-623-3975 Mon-Thur 10:00am-4:00pm

<b>Tulare CVSO</b> 205 N. L Street Tulare, CA 93274 559-681-4960 Mon-Thur 7:30am-5:00pm, Fri 8:00am-12:00pm	<b>Tuolumne CVSO</b> 105 E. Hospital Rd. Sonora, CA 95370 209-533-6280 Mon-Fri 9:00am-12:00pm, 1:00pm- 4:00pm	<b>Ventura CVSO</b> 855 Partridge Dr. Ventura, CA 93003 805-477-5155 Mon-Fri 8:00am-5:00pm
<b>Yolo CVSO</b> 120 W. Main St., Suite A Woodland, CA 95695 530-406-4850 Mon-Fri 7:30am-12:00pm, 1:00pm- 4:00pm	<b>Yuba-Sutter CVSO</b> 5730 Packard Ave., Suite 300 Marysville, CA 95901 530-479-6710 Mon-Fri 8:00am-5:00pm	

## SECTION VI VA AND COMMUNITY RESOURCES

The following section of this guidebook provides information about VA Homeless Programs in California. Although there are many VA medical clinics throughout the state, many of them do not have VA Homeless Staff on site. The sites listed in this section have one or more Homeless Staff on site.

If you are a homeless Veteran or are at risk of becoming homeless and are in an area where there are no VA Homeless Staff in a nearby clinic, or are unsure of where to go for VA Homeless Programs, please call the VA's National Call Center for Homeless Veterans: 1-877-424-3838 (1-877-4AID-VET) or go to [www.va.gov/HOMELESS](http://www.va.gov/HOMELESS). The National Call Center for Homeless Veterans is available 24/7. Additionally, you can dial 2-1-1 to reach your local United Way's Information & Referral Help Line. 2-1-1 provides free information and referral on community resources for food, housing, employment, health care, counseling and more.



The following list of VA Medical Centers and Outpatient Clinics is provided in order to assist Veterans with reentry planning. These listings are current as of July 2013, when this document was being prepared, and users of this resource guide should be made aware that some of this information may have changed since the publication of this guide. You can find updated information on all VA locations on the VA website or the toll-free line: [www.va.gov](http://www.va.gov) or 1-877-222-VETS (8387)

Veterans in crisis and family members of Veterans in crisis can contact the confidential toll-free Veterans Crisis Line 24/7 at 1-800-273-8255, Press 1. You can also send a Text to "838255" for help, or go online for help on the Live Veterans Chat: [www.veteranscrisisline.net](http://www.veteranscrisisline.net). Veterans who are homeless or at-risk of homelessness can also contact the 24/7 toll-free VA Homeless Helpline at 1-877-4AID-VET (1-877-424-3838).

**VA Homeless Services Walk-in Clinic Information is listed by Medical Center.**



**VA Sierra Nevada HCS  
975 Kirman Avenue  
Reno, Nevada 89502  
(775)786-7200  
(888)838-6256**

**VA Veterans Outreach Center**  
350 Capitol Hill  
Reno, NV 89502  
(775)324-6600

Homeless Walk-In Clinic: M-F 7am-3:30pm. Assessment & referral for homeless services.  
Employment assistance, showers, laundry facilities.

**Rural Center for Independent Living Carson City NV**  
1895 E Long St  
Carson City, NV 89706-3214  
(775)841-2580

Homeless Walk-In Clinic: Monday 0930-1130. Assessment & referral for homeless services.

**VA Northern California Health Care System  
Sacramento VA Medical Center  
10535 Hospital Way  
Sacramento, CA 95655  
(916)843-7000  
(800)382-8387**

**Chico Outpatient Clinic**  
280 Cohasset Road  
Chico, CA 95926  
(530)879-5000

Homeless Information Groups: Mondays 1-3pm, Fridays, 9-11:30 (530) 879-5060  
VA Eligibility & Enrollment, mental health services, substance abuse services, primary care,  
ancillary services.

**Sacramento VA Medical Center**  
10535 Hospital Way  
Sacramento, CA 95655  
(916)843-7000  
(800)382-8387

Homeless Drop-in Clinic: Monday-Friday 9-12pm, Building 650, Primary Care  
Housing Resource Group, Tuesdays 3-4pm, Building T-2 (916) 366-5439

VA Eligibility & Enrollment, Homeless Information Groups & Walk-in Clinics, full range of medical and surgical services, inpatient services (including psychiatric), mental health services, substance abuse services, primary care, specialty outpatient services.

**Fairfield Outpatient Clinic**

103 Bodin Circle  
Travis AFB, CA 94535  
(707)437-1800

Housing Drop-in Clinic, Tuesdays, 9-12pm (707) 437-1941. VA Eligibility & Enrollment, Homeless Drop in Services, Mental Health and Substance Abuse Services, primary care, urgent care, medical specialty clinics. David Grant Medical Center which has joint VA/DOD inpatient units and emergency services.

**Mare Island Outpatient Clinic**

201 Walnut Ave.  
Mare Island, CA 94592  
(707)562-8200

Homeless Walk-In Clinic: Thursdays, 9-12pm (707) 437-1941  
VA Eligibility & Enrollment, Dental Service, Primary Care, Mental Health.

**Martinez Outpatient Clinic**

150 Muir Road  
Martinez, CA 94553  
(925)372-2000

Housing Resource Group: Tuesdays, 2-3pm, Room B-251, Mental Health Clinic.  
Housing Walk-in Clinic: Fridays, 10-1pm, Room 161, Mental Health Clinic.  
(925) 372-2265 VA Eligibility & Enrollment, Homeless Drop in Services, Mental Health and Substance Abuse Services, primary care, urgent care, medical specialty clinics, Community Living Center, Brain Health Center

**Oakland Behavioral Health Clinic**

525 – 21<sup>st</sup> St.  
Oakland, CA 94612  
(510)587-3400

Homeless Walk-In Clinic: M-F 8am-4pm. Assessment & referral for homeless services.  
Homeless On-Duty Social Worker Number (510) 453-8478  
VA Eligibility & Enrollment, showers, laundry facilities, mental health services, substance abuse services, methadone program. Mental Health and Substance Abuse triage assessment services are available on a walk-in basis. VBA – Every other Tuesday from 9-2pm (call for dates). VA Disability claims, Info on VA Home Loans/GI Bill etc.

**San Francisco VA Medical Center  
4150 Clement St.  
San Francisco, CA 94121  
(415)221-4810  
(877)487-2838**

**Eureka CBOC**

930 W Harris Street  
Eureka, CA 95503  
(707)269-7549

Homeless Walk-In Clinics: M & F 9am-12pm or by appt. Housing Support Group @ Eureka CBOC on TH 1:30pm-2:30pm. VBA – Fridays 8am-12pm walk-ins. VA Disability claims, Info on VA Home Loans/GI Bill etc. North Coast Veterans Resource Center (109 4<sup>th</sup> St; Eureka, CA) on M & TH 3pm-4:30pm. Arcata House Partnership Annex (501 9<sup>th</sup> St; Arcata, CA) on W 2:00-4:00. Willow Creek Community Resource Center (38883 CA-299; Willow Creek, CA) 3<sup>rd</sup> W from 10am-12pm. Tiger Lily Books (665 Redwood Dr; Garberville, CA) 2<sup>nd</sup> W from 10am-12pm. Assessment & referral for homeless services. VA Eligibility & Enrollment, Homeless Walk-in clinic, Housing Workshops, Employment assistance, medical care, mental health care. Appointment required, please call Appointment Line: 707-269-7500 mental health triage available M-F 8am-4:30p.

**Clearlake CBOC**

15145 Lakeshore Drive  
Clearlake, CA 95422  
(707)995-7200

Homeless Walk-In Clinic: M-F 8am-4pm. Assessment & referral for homeless services by VA social worker. VA Eligibility & Enrollment, Employment assistance, community resources assistance, medical care, mental health care. Appointment required, please call Appointment Line: (707)995-7200 VSO - every Monday & Wednesday 8a-4:30p. EDD Veteran Employment Specialist- every Tuesday 8a-4p. The Bridge - A peer support and social center. 14954 Burns Valley Rd, Clearlake, CA (707)995-2973. M-F 9a-4:30p

**Clearlake Vet Connect:**

American Legion Post 437  
14770 Austin Road  
Clearlake, CA.

2<sup>nd</sup> Wed of every month from 9am-12pm.

**Lakeport Vet Connect:**

Umpqua Bank  
805 11<sup>th</sup> Street  
Lakeport, CA.

3<sup>rd</sup> Wed of every month from 9am-12pm

VA Enrollment assistance, VA Clearlake Community Based Outpatient Clinic Social Worker available, Lake County Veteran Services Office (VSO) staff available for assistance with VBA claims/matters, Lake County Mental Health staff available, community homeless program staff person available, food assistance available, clothing assistance available, Social Security Administration assistance available at times, legal assistance available at times, and Veteran Volunteers from several Veteran Service Organizations in rural Lake County, CA.

**Ukiah CBOC**

630 Kings Court  
Ukiah, CA 95482  
(707)468-7700

Homeless Walk-In Clinic: M-F 8am-4pm. HUD VASH Program for eligible veterans Assessment & referral for homeless services by VA social worker) VA Eligibility & Enrollment (Wednesdays), Employment assistance, community resources assistance, medical care, mental health care -appointment required, please call Appointment Line: 707-468-7726. Veteran Service Office- every Thursday 8a-4:30p.

**Sonoma County Vet Connect**

Veterans Memorial Building  
1351 Maple Avenue  
Santa Rosa, California 95405  
(707)536-1656

Vet Connect - Homeless Walk-In Clinic as follows:

Santa Rosa Veterans Memorial Building – Every Tuesday 9:00-12:00 noon  
1351 Maple Ave, Santa Rosa, CA  
Guerneville Veterans Memorial Bldg. – 2<sup>nd</sup> Thurs of each mo 12:00-3:00 pm  
1<sup>st</sup> & Church Street  
Sonoma Veterans Memorial Building-3<sup>rd</sup> Thurs of each mo 12:00-3:00 pm  
126 First Street West  
Petaluma Veterans Memorial Building-4<sup>th</sup> Thurs of each mo 12:00-3:00 pm  
1094 Petaluma Blvd S.

VA Eligibility & Enrollment, clothing, employment and vocational rehab assistance, food stamp representative/application, Pro Bono attorney, mental health services, financial counseling. Partner agencies vary according to location and may include Vet Connect, VA Health Care, County of Sonoma Mental Health, North Bay Veterans Resource Center, Financial Institutions, EDD Workforce Services Veteran Employment Representative, Good Will, Brickwood Medical & Mental Health Service, VA Loan Educator/Assistance, Dept of Social Security, Sonoma County Human Services.

**San Francisco VA Community Based Outpatient Clinic (CBOC)**

401 3<sup>rd</sup> Street  
San Francisco, CA 94107  
(415)281-5101

Homeless Walk-In Clinic: M-F 8:00am-4:30pm. Assessments and referrals for housing needs, medical care, mental health care, employment assistance, VA eligibility & enrollment, showers, and laundry facilities.

Groups:

Sobriety Support, Mon, Wed, Fri, 9:30am-10:30am

Harm Reduction—Drugs, Meds, & More, Tues, 9:30am-10:30am

Hepatitis C Education, Thurs, 2:00pm-3:00pm

Housing First! Thurs, 4:00pm-5:00pm

Live Well with PTSD, Substance Use, Anger, & Depression, Fri, 11:00pm-12:00pm

Supportive Services for Veterans and Families (SSVF) Every Wed 830am-930am

Child Support Issues 2<sup>nd</sup> Wed every month from 930am-1130am

Alcoholics Anonymous, Thurs, 630pm-730pm

**San Bruno CBOC**

1001 Sneath Lane  
Suite 300, Third Floor  
San Bruno, CA 94066  
(650)615-6000

Clinic is open Monday-Friday 8-4:30. Register for care: Walk in, then, make appointment. Enrollment for VA healthcare, primary medical care, nursing, pharmacy, podiatry, nutrition, social work and mental health.

**VA Palo Alto Healthcare System**  
**3801 Miranda Drive**  
**Palo Alto, CA**  
**(650)493-5000**  
**(800)455-0057**

**Comprehensive Care Clinic**

795 Willow Rd  
Bldg 321  
Menlo Park, CA  
(800)455-0057

Homeless Walk-In Clinic: Mondays 8:30am-12 noon. Housing Resource Group Mondays 10am-11am. VA Eligibility & Enrollment, Housing Resources, medical care, mental health care, social work consultation. Every Monday- Invision-Shelter Network (HCHV contract provider and SSVF provider, Goodwill of the Silicon Valley (SSVF & Voc Rehab) Quarterly 2<sup>nd</sup> Monday-Cal Fresh, Social Security, Record Clearance (Santa Clara County), Project Hire, Vet Court (San Mateo and Santa Clara County), Catholic Charities.

**Campbell EDD**

2450 South Bascom Ave  
Campbell, CA  
(408)369-3606

Medical Outreach 2nd Friday of the month 9-3. Medical care

**San Jose VA clinic**

80 Great Oaks Blvd Rm B-209  
San Jose, CA 95119  
(408)363-3000

Housing Resource Group Tuesday 11am-12pm. Social work consultation. Goodwill of the Silicon Valley (SSVF provider and Veterans Vocational rehabilitation program)

**EHC Lifebuilders**

2011 Little Orchard  
San Jose, CA 95125  
(408)510-7522

Homeless Walk-In Clinic: Tuesdays 9:00am-12 noon. Housing Resource Group 9am-10am. Housing resource referrals, medical care, social work consultation. EHC's Veterans service center drop in, EHC HCHV provider.

**EHC Lifebuilders**

2011 Little Orchard  
San Jose, CA 95125  
(408)510-7522

Veterans Service Center M-F 8am-5pm. Case management, support groups, substance use groups, referrals to emergency and transitional housing, vocational skills support, computer lab, weekly movie nights, food, legal assistance (Friday 9am-12) Social Security, Partners Vary, please call for most recent schedule.

**Santa Cruz Vet Center**

1350 41<sup>st</sup> St  
Capitola, CA  
(831)464-4575  
(877)-927-8387

Housing Resource Group Wednesdays 1-2pm. Social work consultation, screenings and referrals for food bank and vocational rehab Second Harvest Food Bank, Vocational Rehabilitation Services Inc.

**Veterans Hall**

1040 Emeline Ave Bldg E  
Santa Cruz, CA 95060

Homeless Medical Outreach: Tuesdays 9-12 noon and Wednesdays 9-12 noon & 1-3  
VA Eligibility & Enrollment, medical care, mental health care, social work consultation,  
voc rehab programs, non-profit advocacy group, County wide collaborative veteran services,  
food stamps, serve lunch on Wednesdays, emergency contract housing and shared HV  
housing, transportation resources. VRSI and Shoreline, 21st Century Vets, Santa Cruz County  
Veteran Advocate, United Veteran Council, Santa Cruz County VSO, VET-NET, Cal Fresh,  
Twin Lakes Church, Paget Center and Gault House, Lifeline.

**Vets Memorial Building**

649 San Benito Street  
Hollister, CA 95023  
(831) 636-4390

Medical Outreach 1<sup>st</sup> Tuesday of the month from 1-5pm. Medical care

**Monterey VA Clinic**

3401 Engineer Lane Rm C143  
Seaside, CA 93955  
(831) 883-3800

Housing Resource Group Thursdays 10-11am. Social work consultation.

**Monterey Peninsula College**

980 Fremont St  
Monterey, CA 93940

Medical Outreach 1<sup>st</sup> Thursday of the month 10-3. (none in January, June, July, August)

**Salinas 1<sup>st</sup> Methodist**

404 Lincoln Ave  
Salinas, CA 93901  
(831)883-3800

Housing Resource Group Tuesdays 11:30-12:30. Social work consultation.

**One Stop Career Center**

730 La Guardia St  
Salinas, CA 93905  
(831)796-3600

Medical Outreach 1<sup>st</sup> Wed of the month 10-3. Medical care

**King City**

Corner Lot- Broadway and Canal Streets  
King City, CA 93930

Medical Outreach Last Wednesday of the month 10-3. Medical care

**Fremont VA Clinic**

39199 Liberty St.  
Fremont, CA 94538  
(510)791-4000

Housing Resource Group Friday 11 am-12pm. Social work consultation.

**Livermore VA Clinic**

4951 Arroyo Rd.  
Bldg 32, 5<sup>th</sup> Floor Rm 515  
Livermore, CA  
(925)373-4700

Housing Resource Group Mondays 11-12 noon. Social work consultation.

**Las Positas College**

3000 Campus Hill Dr  
Livermore, CA 94551

Medical Outreach 3rd Monday of the month 9-12. (none in January, June, July, Aug)

**Dignity's Alcove**

141 S. California St  
Stockton, CA 95206  
(209)598-5251

Medical Outreach Wednesdays 9-12am. Housing Resource Group Tuesdays 8:30am -10 am.  
Housing workshop, social work consultation, medical care.

**Modesto Salvation Army**

320 9<sup>th</sup> Street  
Modesto, CA 95353  
(209)525-8954

Housing Resource Group Wednesdays 10am-11am. Social work consultation.



**Cal State Stanislaus University**

One University Circle  
Turlock, CA 95382

Medical Outreach 2<sup>nd</sup> Monday of the month 9-12. (none in January, June, July, August)

**VA Central California Health Care System**

2615 E. Clinton Ave

Fresno, CA 93703

(559)225-6100

(888)826-2838

**VA Fresno Homeless Program**

155 E. Shaw Suite 100

Fresno, CA 93703

(559)225-6100 x5764/4181

Homeless Walk-In Clinic: M-F 8am-4pm. Assessment & referral for homeless services. H&P Exams VA Eligibility & Enrollment, Employment assistance, Peer Support Services, VJO, HUD/VASH, HCHV (Emergency Housing) Hygiene Kits/Bus Tokens. Blankets/sleeping bags (as available). Shuttle service to Main Hospital. Evaluation by a NP on site (H&P Exams) Referral to Mental Health/Primary Care/Specialty Clinics. Medication re-fills/Prescription.

**VA Greater Los Angeles Healthcare System**

VA West Los Angeles Campus

11301 Wilshire Blvd., Building 206, Los Angeles, CA 90073

(310)478-3711

**Homeless Screening Clinic**

VA West Los Angeles Campus

11301 Wilshire Blvd., Building 206, Los Angeles, CA 90073

(310)478-x3711 x 44534

Homeless walk-In clinic: Mon, Wed., Thurs, Fri 8 am-3:30 pm, Tuesday, 8 a.m.-12 p.m. Assessment & referral for homeless services. VA Eligibility & Enrollment, benefits assistance, showers, laundry facilities, primary care, mental health care, sack lunches, emergency housing. Los Angeles County Department of Mental Health (works with healthcare ineligible Veterans) Los Angeles County Veterans Benefits Officer - Veteran Benefits Administration Officer.

**VA Los Angeles Ambulatory Care Center (LAACC)**

351. E. Temple Street (122)

Los Angeles, CA 980012

(213)253-2677 ext. 4793 (Community Care)

Homeless Walk In Clinic – Monday thru Friday 7:30 am to 4:00 pm. Assessment & Referrals for homeless services. VA Eligibility & Enrollment, H & P Exams, Social Service, Veterans Justice Outreach, Addictive Behaviors Clinic, Dental Services, Mental Health, VBA, Vocational Rehab services, various groups on successful sobriety, grief and loss, addiction, anger management, depression and various other mental health drop in groups. VBA – Monday thru Friday 8 am to 3pm. Appointments required for all services other than homeless walk in housing referral services) Call : 213 253-2677 Ext. 4793 for appointments.

**VA Long Beach Healthcare System**  
**5901 East 7th Street**  
**Long Beach, CA 90822**  
**(562)826-8000**  
**(888)769-8387**

**Healthcare for Homeless Veterans Program (HCHV)**

5901 East 7th Street  
Bldg. 128, First Floor  
Long Beach, CA 90822  
(562) 826-8000 ext. 2336

General Office Hours: M-F 8am-4pm. Homeless Outreach Walk-In Clinic: Assessment, linkage & referral for homeless services. Justice Outreach: Outreach and pre-release assessments and services for incarcerated Veterans. Referrals and linkages to medical, psychiatric and social services. Short term case management assistance upon release. Combat Veteran Court Program: Collaboration with Orange County Veteran Court team to provide treatment and recovery services with the possibility of certain charges considered for dismissal upon successful completion of program. Grant and Per Diem: Collaboration with community partners to provide supportive housing (up to 24 months) and a variety of other services including case management, counseling etc. with the goal of helping homeless Veterans achieve residential stability, increase skill level/income and obtain greater self-determination. HUD/VASH: Collaboration with the Department of Housing and Urban Development. Provides permanent housing and ongoing case management and treatment services for homeless Veterans. Partnerships in Effective Recovery (PIER) M-F: 8-4 ext. 3005 bldg. 132. Peer counseling, recovery fellowship, linkage to resources, help with immediate needs (e.g. shower, laundry, food). Homeless Veterans Supportive Employment Program M-F: 8-4 Bldg. 133/Room W-70 ext(s) 6020/4720/4787/4847/5225 To provide Employment Supportive Services to interested Veterans who were formerly homeless or are at risk of becoming homeless who has difficulty in obtaining or maintaining a job in the community. Veterans Service Organizations: Walk In- M-F: 8-3 Bldg. 162, Room 110 Ext. 4404. Assistance with benefits, filing service connected claims, checking status of claim, eligibility questions

**VA Loma Linda Healthcare System**  
**11201 Benton Street**  
**Loma Linda, CA 92357**  
**(800)741-8387**  
**(909)825-7084**

**VA Loma Linda Healthcare for Homeless Veterans Program**

11201 Benton Street – Social Work Office 2<sup>nd</sup> Floor  
Loma Linda, CA 92357  
(909)583-6085

Homeless Walk-In Clinic: M-F 7:30am-4:30pm. Assessment & referral for homeless services. VA Eligibility & Enrollment, Showers, Life Skills Groups, Employment Assistance, Substance Abuse Treatment, Medical and Mental Health Care VBA – On the 2<sup>nd</sup> Thursday of each month, from 8am – 11:30am, in the EOF/OIF/OND department on the first floor. VA disability claims, Info on VA Home Loans/GI Bill etc.

**VA San Diego Healthcare System**  
**3350 La Jolla Village Dr.**  
**San Diego, CA 92161**  
**(858)552-8585**  
**(800)331-8387**

**VA La Jolla Homeless Veterans Outreach Clinic**

3350 La Jolla Village Dr.  
2 North (check in at ADTP window)  
San Diego, CA 92161  
(858)642-3665

Homeless Walk-In Clinic: Mon-Thurs 7:30am-2pm. Assessment & referral for homeless services. Homeless Patient Aligned Care Team. Access to: Primary Care Services, Mental Health Services, Lab Services, Audiology Services, Enrollment/Member Services, Homeless Prevention Program, Compensation & Pension, Podiatry, Social Work, Nutrition, Optometry, Dermatology, Diabetes, Transition Case Management (OIF/OEF/New Dawn), Spiritual Care, Pharmacist Consultations, Patient Education, Volunteer Services, Prosthetics, Orthopedics, Physical Therapy, Radiology Service, Women's Health. HCHV Staff provides linkage to Community and VA Services VBA, VSO.

**VA Homeless Veterans Outreach Clinic**

1545 4<sup>th</sup> Ave.  
San Diego, CA 92101  
(619)235-6572

Homeless Walk-In Clinic: Tuesday 1pm-3pm (2<sup>nd</sup> & 4<sup>th</sup> Tuesday of the month) VBA Clinic  
Tuesday 1pm-3pm (3<sup>rd</sup> Tuesday of the month) Assessment & referral for homeless services.  
Access to: Senior Nutrition Center, Cyber Café, Center for Healthy Aging,  
Case Management, Nurse Case Management, Learning Institute, Chinese Outreach & Case  
Management, Homeless Prevention Program, MHS, Affordable housing Program.  
Seniors Community Center, VBA, Bridges to recovery (UCSD), CSUSD College of Health &  
Human Services, Sharp Mesa Vista Hospital

**VA Homeless Veterans Outreach Clinic**

1501 Imperial Ave.  
San Diego, CA 92101  
(619)233-8500

Homeless Walk-In Clinic: Wednesday 8:30am-10:30am. Assessment & referral for homeless  
services. VBA Clinic: Mondays 12:15pm-3:30pm (2<sup>nd</sup> and 4<sup>th</sup> Mondays of the month). Access to:  
Medical Clinic, Dental Clinic, Family Psychiatric Services, Children Psychiatric Services,  
Transportation Assistance, Short Term Housing single/family, Legal Aid, Long Term Housing  
Assistance single/family, Child Care, Employment Services, Spiritual Care, Hot Lunches Served  
Monday-Friday. St. Vincent de Paul's, Legal Aid Society of San Diego, Strive/2<sup>nd</sup> Chance  
Housing, VBA, Travelers Aid.

**VA Escondido Homeless Veterans Outreach Clinic**

815 Pennsylvania Ave  
Escondido, CA 92025  
(760)643-4698

Homeless Walk-In Clinic: Tuesday 8am-12pm. Assessment & referral for homeless services.  
All services are by appointments only, except Homeless Clinic. Access to:  
Primary Care Services, Lab Services, Educational Services, Mental Health Services.  
HCHV Staff provides linkage to Community and VA services.

**VA Oceanside Homeless Veterans Outreach Clinic**

1300 Rancho del Oro  
Oceanside, CA 92056  
(760) 643-4698

Homeless Walk-In Clinic: Monday 10am-2pm. Thursday 8am-11:30am. Assessment &  
referral for homeless services. Access to: Primary Care Services, Mental Health Services, Lab  
Services, Audiology Services, Enrollment/Member Services, Compensation & Pension,  
Podiatry, Social Work, Nutrition, Optometry, Dermatology, Diabetes, Transition Case  
Management (OIF/OEF/New Dawn), Spiritual Care, Pharmacist Consultations, Patient  
Education, Volunteer Services, Orthopedics, Physical Therapy, Radiology Service, Women's  
Health. HCHV Staff provides linkage to community and all VA services. VBA.

**VA Southern Nevada Healthcare System  
6900 North Pecos Road  
North Las Vegas NV 89086  
(702)791-9000**

**Community Resource & Referral Center**

916 Owens Blvd  
North Las Vegas, Nevada 89106  
(702)791-9000

Homeless Walk-In Clinic: M-F 7:00am to 2:00pm. Assessment & referral for homeless services.

Supplemental Nutrition Assistance Program (SNAP)

Monday (8AM-12PM) Wednesday (1PM-4PM) (Not in the office every 2<sup>nd</sup> Wed)

Walk in or call for appointment (702)791-9077)

US Vets Wednesday (10AM-12PM, 1PM-2PM) Thursday (10AM-12PM, 1PM-2PM) Walk in or call partner.

Disabled American Veterans Monday to Friday (8AM-12PM)

Walk in or call for appointment (702)791-9077)

Southern Nevada Center For Independent Living Every 2nd and 4th Thursday (8AM-12PM)

Walk in or call for appointment (702)791-9077)

Clark County Child Support Services Every 4th Thursday (8AM-12PM)

Walk in or call for appointment (702)791-9077)

**Vet Center**

We are the people in VA who welcome home war veterans with honor by providing quality readjustment counseling in a caring manner. Vet Centers understand and appreciate Veterans' war experiences while assisting them and their family members toward a successful post-war adjustment in or near their community. For information on the address and phone numbers for any of the Vet Center locations or more details on Vet Center services, please go to [www.vetcenter.va.gov](http://www.vetcenter.va.gov) or call 1-877-WAR-VETS (1-877-927-8387)

## COMMUNITY RESOURCES

### Disclaimer:

The following list of community resources is provided in order to assist Veterans with reentry planning. This list includes a variety of programs and services, some of which have formal relationships with the U.S. Department of Veterans Affairs, but many which do not. The fact that an agency/organization is listed in this guidebook does not indicate an endorsement of or referral to any of these agencies/organizations, and Veterans are encouraged to evaluate whether the programs provide the appropriate services needed. Additionally, the listings are current as of July 2013, when this document was being prepared, and users of this resource guide should be made aware that agency information may have changed since the publication of this guide.

The following is a partial listing of community resources available to community members living in that region. You will find many resources when you are released and are encouraged to participate in the Parole PACT Meeting where local services will come to offer their help.

**Community Resources are listed alphabetically by County. The following Acronyms denote specific provider population and/or services.**

C	Children
Coed	Men and Women
DV	Domestic Violence
F	Family
M	Men
MH	Mental Health
NA	Native American
OP	Out-patient
R	Referral
V	Veteran
W	Women
(Blank)	Contact provider for information

<b>ALAMEDA COUNTY</b>			
<b>Emergency Housing</b>			
24 hour OPTCC	7729 Macarthur Blvd Oakland 94605	(510)383-9150	
Berkeley Shelter	2367 Bancroft Way Berkeley 94704	(866)960-2132	R
B. Housing Project	1931 Center St Berkeley 94704	(510)649-4980	M
Crossroads	7515 International Blvd Oak 94621	(510)532-3211	M/W/F
Adobe Services	588 Brown Rd Fremont 94539	(510)252-0910	V
Second Chance	6330 Thornton Ave Newark 94560	(510)792-4357	
Family Shelter	22671 3rd St Hayward 94541	(510)581-3223	
H. R. Family Shelter	559 16th St Oakland 94612	(510)419-1010	
S. A. Family Shelter	2794 Garden St Oakland 94601	(510)437-9437	
City Team Ministries	722 Washington St Oakland 94607	(510)452-3758	M
<b>Transitional Housing</b>			
B.O.S.S.	2065 Kittredge St #E Berkeley 94704	(510)649-1930	
Bonita House	6333 Telegraph Ave Oakland 94609	(510)923-0180	
Bridge Foundation	1816/1820 Scenic Berkeley 94709	(510)548-7270	
Options Recovery	1931 Center St Berkeley 94704	(510)666-9552	
Operation Dignity	160 Franklin St #103 Oakland 94612	(510)287-8465	V
Image On The Rise	8801 International Oakland 94621	(510) 224-4647	M/W
Another Step	27477 Hemlock Ranch Hayward 94544	(510)825-7513	M/W
West House	624 14th St Oakland 94612	(510)419-0360	
Praise Fellowship	7711 MacArthur Blvd Oakland 94605	(510)569-8066	M
Elizabeth House	P.O. Box 1175 Berkeley 94704	(510)658-1380	
Latino Commission	3315 International Blvd Oakland 94601	(510)536-4764	W
Sunrise Village	588 Brown Rd Fremont 94539	(510)252-0910	
Women's Center	2140 Dwight Way Berkeley 94704	(510)649-4965	
B. Housing Project	2367 Bancroft Way Berkeley 94704	(510)649-4965	
<b>Food / Clothing Resources</b>			
McGee Church	1640 Stuart Berkeley 94704	(510)843-1774	
Food Bank	7900 Edgewater Dr Oakland 94621	(510)635-3663	
VA Clothing Closet	525 21 <sup>st</sup> St Oakland 94612	(510)453-8478	
St. Vincent de Paul	2260 San Pablo Ave Oakland 94612	(510)877-9256	
St. Vincent de Paul	675 23rd St Oakland 94612	(510)451-7676	
Open Door Mission	92 7th St Oakland 94607	(510)451-7924	
Ministry Center	5316 Telegraph Ave Oakland 94609	(510)658-4457	
Wright Foundation	3119 Market St Oakland 94608	(510)601-8119	
Tri-City Volunteers	37350 Joseph St Fremont 94536	(510)793-4583	
Viola Blythe Center	37365 Ash St Newark 94560	(510)794-3437	
<b>Substance Abuse Treatment</b>			
VA Oakland Clinic	525 21 <sup>st</sup> St Oakland 94612	(510)773-7242	V
Behavioral Health	1900 Embarcadero Oakland 94606	(800)491-9099	
Mental Health	2000 Embarcadero Cove #208 94606	(510)567-8120	
Public Health	1000 Broadway #500 Oakland 94607	(510)208-5979	
Homeless Health	1900 Fruitvale Ave Oakland 94601	(510)532-1930	
Bridge Foundation	1816/820 Scenic Ave Berkeley 94709	(510)548-7270	

Options Recovery	1931 Center St Berkeley 94704	(510)666-9552	
East House	2344 East 15th St Oakland 94601	(510)261-1855	
Bi-Brett	7200 Bancroft Ave Oakland 94605	(510)568-2432	M/W
Victory Outreach	621 Schafer Hayward 94544	(510)783-1022	M/W
Cronin House	2595 Depot Rd Hayward 94545	(510)784-5874	Coed
On Way Recovery	20424 Haviland Ave Hayward 94541	(510)276-3661	W
House of Ruth	7801 MacArthur Blvd Oakland 94605	(510)562-1593	W
Latino Commission	3315 International Oakland 94601	(510)536-4764	W
Orchid Center	1342 East 27th St Oakland 94606	(510)535-0611	W
Orchid Recovery Ct	1392 East 27th St Oakland 94608	(510)535-0611	W
City Team Ministry	722 Washington St Oakland 94607	(510)452-3758	M
Cura Inc	4510 Peralta Blvd #1 Fremont 94536	(510)713-3200	M
W. Oakland Center	451 28th St Oakland 94612	(510)273-4900	M
Latino Commission	425 Vernon St Oakland 94610	(510)536-4760	M
S. Army Rehab Ctr.	601 Webster St Oakland 94607	(510)451-4514	M
Wistar R and R	9735 Empire Rd Oakland 94603	(510)562-8370	M
<b>Employment Assistance</b>			
Oakland VA CWT	525 21 <sup>st</sup> St Oakland 94612	(510)587-3400	V
Career Center	24100 Amador 3 <sup>rd</sup> Fr Hayward 94544	(510)670-5700	
One Stop Center	39399 Cherry St. Newark 94560	(510)742-2323	
Depart of Rehab	39155 Liberty St Fremont 94538	(510)794-2458	
Tri-Valley ROP	2600 Kitty Hawk Rd Livermore 94551	(925)455-4800	
Re-Entry Center	24100 Amador St Hayward 94544	(510)670-5825	
Rubicon Services	1918 Bonita Ave Berkeley 94704	(510)549-8820	
Work Force	1433 Webster St Oakland 94612	(510)891-8773	
Goodwill Industries	1600 San Pablo Ave Oakland 94612	(510)903-3220	
<b>Legal / Financial Assistance</b>			
Law Center	2921 Adeline St Berkeley 94703	(510)548-4040	
H. A. C	3126 Shattuck Ave Berkeley 94705	(510)540-0878	
Bay Area Legal Aid	1735 Telegraph Berkeley 94612	(510)663-4744	
Vol. Legal Services	70 Washington St Oakland 94607	(510)302-2222	
Re-Entry Center	24100 Amador St Hayward 94544	(510)670-5825	
Social Services	8477 Enterprise Way Oakland 94621	(510)777-2300	
Social Services	39155 Liberty St Fremont 94536	(510)670-6000	
Self Sufficiency Ctr.	24100 Amador St Hayward 94544	(510)670-6000	
Social Security	7200 Bancroft Ave Oakland 94605	(800)772-1213	

ALPINE COUNTY			
<b>Housing Resources</b>			
Live Violence Free	100 Foothill Rd Markleeville 96120	(530)694-1853	DV
Live Violence Free	2941 Lake Tahoe Blvd S.L.T. 96150	(530)544-2118	DV
<b>Substance Abuse Treatment</b>			
VA Carson Valley	925 Ironwood Dr Minden NV 89423	(775)782-5265	V
Behavioral Health	75C Diamond Valley Markleeville 96120	(530)694-1816	



Behavioral Health	367 Creekside Dr Bear Valley 95223	(209)753-2831	
<b>Employment/Legal/Financial Assistance</b>			
Career Center	75A Diamond Valley Markleeville 96120	(530)694-2235	
Social Services	75A Diamond Valley Markleeville 96120	(530)694-2235	
Native TANF	96 Washoe Blvd # C Markleeville 96120	(530)694-2555	

<b>AMADOR COUNTY</b>			
<b>Housing/Food/Clothing Resources</b>			
Family Shelter	125 Broadway St Jackson 95642	(209)223-9215	
Family Shelter	935 Hwy 49 Jackson 95642	(209)223-9215	
ATCAA	935 S. State Hwy 49 Jackson 95642	(209)223-1485	R
Interfaith Council	12181 Airport Rd Jackson 95642	(209)267-9006	
Upcountry Center	19386 Hwy 88 Pine Grove 95665	(209)296-2785	
<b>Substance Abuse Treatment</b>			
VA Sonora OPC	13663 Mono Way Sonora 95370	(209)588-2600	V
Health Services	10877 Conductor Sutter Creek 95685	(209)223-6677	
Mental Health/AOD	10877 Conductor Sutter Creek 95685	(209)223-6412	
<b>Employment/Legal/Financial Assistance</b>			
AVCO, Inc (Vets)	220 Scottsville Blvd #B Jackson 95642	(209)223-2286	
Job Connection	245 New York Ranch Jackson 95642	(209)223-4411	
Social Services	10877 Conductor Sutter Creek 95685	(209)223-6550	

<b>BUTTE COUNTY</b>			
<b>Emergency Housing</b>			
Sabbath House	1297 Park Ave Chico 95928	(530)899-9343	W/C
Jesus Center	1297 Park Ave Chico 95928	(530)345-2640	W/C
Salvation Army	567 E.16th St Chico 95928	(530)342- 2199	
Salvation Army	1640 Washington Ave Oroville 95966	(530)534-7155	
Torres Shelter	101 Silver Dollar Way Chico 95928	(530)8919048	
Rescue Mission	4250 Lincoln Blvd. Oroville 95966	(530)533-9120	
<b>Transitional Housing</b>			
Vectors	171 Rio Lindo Ave Chico 95926	(530)343-3040	V
Esplanade House	181 E. Shasta Ave Chico 95973	(530)891-2977	F
<b>Food / Clothing Resources</b>			
Ladies Society	1386 Longfellow Ave Chico 95928	(530)895-8331	
7th Day Adventists	1877 Hooker Oak Ave Chico 95928	(530)342-7777	
Resource Center	6249 Skyway Paradise 95969	(530)872-4015	
C. A. A.	2640 S. Fifth Ave #7 Oroville 95965	(530)712-2600	
Presbyterian Church	946 Magnolia St Gridley 95948	(530)846-5952	
Bible Family Church	2570 N. Villa Ave Palermo 95968	(530)533-2975	
The Hope Center	6120 Lincoln Blvd #G Oroville 95966	(530)538-8398	
Alliance Church	6491 Clark Rd Paradise 95969	(530)877-7069	

<b>Substance Abuse Treatment</b>			
VA Chico OPC	280 Cohasset Rd Chico 95926	(530)879-5000	V
AOD Services	564 Rio Linda Ave # 204 Chico 95926	(530)879-3950	
AOD Services	2430 Bird St Oroville, 95965	(530)538-7277	
Public Health	695 Oleander Chico 95926	(530)879-3665	
Behavioral Health	109 Parmac Rd Ste 2 Chico 95926	(530)891-2850	
TRI County Services	2740 Oro Dam Blvd East Oroville 95966	(530)533-5272	
WELL Ministry	2612 Esplanade Chico 95973	(530)343-1935	
Cherokee House	2041 Fogg Ave Oroville 95966	(530)533-5429	M
Jordan Ministries	7582 Irwin Ave Palermo 95968	(530)534-1382	
Nor-Cal Treatment	3114 Myers St Oroville 95965	(530)533-7664	
Skyway House	40 Landing Circle Chico 95973	(530)898-8326	
Fathers Church	2656 Ft. Wayne St Oroville 95966	(530)534-4140	
<b>Employment/Legal/Financial Assistance</b>			
One-Stop Center	2445 Carmichael Dr Chico 85928	(530)895-4364	
EDD	2348 Baldwin Ave Oroville 95966	(530)538-2228	
One-Stop Center	78 Table Mtn. Blvd Oroville 95965	(530)538-7301	
Nor- Cal Legal Svc	541 Normal Ave Chico 95928	(530)345-9493	
CLIC	25 Main St, Suite 102 Chico 95929	(530)898-4354	
SHARP	655 Oleander Ave Chico 95926	(530)532-7024	
SHARP	1675 Montgomery St Oroville 95965	(530)532-7015	
Starting Over Strong	P.O. Box 2104 Willows 95988	(530)867-3296	
Social Services	78 Table Mtn. Blvd Oroville 95965	(800)499-9189	

<b>CALAVERAS COUNTY</b>			
<b>Housing/Food Resources</b>			
Resource Connect	444 East St. San Andreas 95249	(209)754-3114	
Helping Hands	820 S. Main St Angels Camp 95222	(209)736-4575	
<b>Substance Abuse Treatment</b>			
VA Sonora OPC	13663 Mono Way Sonora 95370	(209)588-2600	V
Changing Echoes	7632 Pool Station Angels Camp 95222	(800)633-7066	
Behavioral Health	891 Mtn. Ranch Rd San Andreas 95249	(209)754-6555	
<b>Employment/ Legal /Financial Assistance</b>			
Job Connection	700 Mtn. Ranch Rd San Andreas 95249	(209)754-4242	
Resource Connect	444 E. St. Charles San Andres 95249	(209)754-3114	
Sierra Hope	1168 Booster Way Angles Camp 95222	(209)736-6792	
Human Services	509 E. St. Charles San Andreas 95249	(209)754-6448	

<b>COLUSA COUNTY</b>			
<b>Housing /Food/ Clothing</b>			
Impact Life Shelter	541 Fremont St Colusa 95932	(530)458-5776	
One Stop Partners	144 & 146 Market St Colusa 95932	(530)458-0326	

Impact Life	541 Fremont St. Colusa 95932	(530)458-5776	
<b>Substance Abuse Treatment</b>			
VA Chico OPC	280 Cohasset Rd Chico 95926	(530)879-5000	V
Health Services	251 E. Webster St Colusa 95932	(530)458-0250	
Mental Health Svc	162 E. Carson Ste A Colusa 95932	(530)458-0520	
Indian Health Clinic	3710 State Hwy 45 #A Colusa 95932	(530)458-5501	NA
<b>Employment/Financial Assistance</b>			
One-Stop Partners	144 & 146 Market St Colusa 95932	(530)458-0326	
Rush Services	310 5th St Colusa 95932	(530)458-2280	
Human Services	251 E. Webster St Colusa 95932	(530)458-0250	

CONTRA COUSTA COUNTY			
<b>Emergency Housing</b>			
Love a Child Mission	2279 Willow Pass Rd Bay Point 94565	(925)458-5663	
Concord Shelter	2047 Arnold Industrial Concord 94520	(925)646-5082	
Brookside Shelter	847 C Brookside Dr Richmond 94801	(800)799-6599	
T. Housing/Shelter	1543 Sunnyvale Walnut Creek 94596	(925)435-2074	
Rescue Mission Ctr.	200 MacDonald Ave Richmond 94801	(510)215-4868	M
Don Brown Shelter	1401 West 4 <sup>th</sup> St Antioch 94509	(925)778-3750	
Rescue Family Ctr.	224 Macdonald Ave Richmond 94801	(510)215-4860	F
Nierika House	1959 Solano Way Concord 94522	(925)676-9768	
Nevin House	3215 Nevin Ave Richmond 94804	(510)232-7633	
Interfaith Program	165 22 <sup>nd</sup> St Richmond 94801	(510)233-2141	
Shepherd's Gate	605 Sycamore Dr Brentwood 94513	(925)308-7507	
<b>Transitional Housing</b>			
TLC C & S Living	P.O. Box 1189 Danville 94526	(800)852-7374	
Rubicon Programs	2500 Bissell Ave Richmond, 94804	(510)235-1516	
Family Center	2369 Barrett Ave Richmond 94804	(510)234-5110	
Housing-Shelter	1815 Arnold Dr Martinez, 94553	(925)957-7568	
J. Cole House	2435 Phillips Lane Antioch 94509	(925)978-2873	
Casa Verde	1401 West 4 <sup>th</sup> St Antioch 94509	(925)752-0360	V
<b>Food / Clothing Resources</b>			
Food Bank	4010 Nelson Ave Concord 94520	(925)676-7543	
FERST Program	1121 Detroit Ave Concord 94520	(925)685-7613	
Loaves & Fishes	1985 Bonifaciot #100 Concord 94520	(925)687-6760	
Loaves & Fishes	1802 Alhambra Ave Martinez 94553	(925)687-6760	
Bread of Life	415 West 6th St Antioch 94509	(925)778-1639	
Church of Nazarene	1650 Ashbury Dr Concord 94520	(925)685-4343	
Church of Christ	99 Mtn. View Ave Bay Point 94565	(925)458-0088	
Grace's Closet	3109 Lone Tree Way Antioch 94509	(925)522-2017	
Church of Christ	500 Minert Rd Walnut Creek 94598	(925)825-7810	
Hillcrest Church	404 Gregory Lane Pleasant Hill 94523	(925)689-8260	
Providence Ministry	1860 Tyler St San Pablo 94806	(510)232-5092	

<b>Substance Abuse Treatment</b>			
VA Martinez OPC	150 Muir Rd Martinez 94553	(925)372-2000	V
Mental Health	1340 Arnold Dr # 200 Martinez 94553	(925)957-5150	
Public Health	597 Center Ave #365 Martinez 94553	(925)313-66711	
Diablo Valley Ranch	11540 Marsh Creek Rd Clayton 94517	(925)672-5700	M
Ujima Family Svc	1901 Church Lane San Pablo 94806	(510)236-3139	
Rescue Mission Ctr.	200 MacDonald Ave, Richmond, 94801	(510)215-4868	M
Discovery House	4645 Pacheco Blvd Martinez 94553	(925)646-9270	M
Neighborhood house	820 23rd St Richmond 94804	(510)229-5000	M
Homeless Health	597 Center Ave #150 Martinez 94553	(925)313-6736	
Shepherds Gate	605 Sycamore Ave Brentwood 94513	(925)308-7507	
Dream Center	161 Sand Ck Rd #A Brentwood 94513	(925)831-2930	
<b>Employment Assistance</b>			
One-Stop Center	281 Pine St Brentwood 94513	(925)634-2195	
Richmond Works	330 25 <sup>th</sup> St Richmond 94804	(510)307-8014	
Opportunity Junction	3102 Delta Fair Blvd Antioch 94509	(925)776-1133	
Rubicon	101 Broadway Richmond 94804	(510)412-1725	
Bay Point Works	3105 Willow Pass Rd, Bay Point 94565	(925)252-2331	
FERST Program	1401 West 4 <sup>th</sup> St Antioch 94509	(925)778-7412	
Exp. Unlimited	4071 Port Chicago Hwy Concord 94520	(925)602-0166	
Vocational Center	228 W. Richmond Pt Richmond 94801	(510)367-2670	
Goodwill Job Center	2701 W. 10th St Antioch 94509	(925)706-9024	
St Vincent de Paul	2210 Gladstone Dr Pittsburg 94565	(925)439-5060	
<b>Legal / Financial Assistance</b>			
Bay Area Legal Aid	1025 Macdonald Ave Richmond 94801	(510)250-5270;	
Pacific Services	415 Railroad Ave Pittsburg 94565	(925)439-1200	
Family Law Program	2300 Clayton Rd # 520 Concord 94520	(925)825-5700;	
Rubicon Legal Svc	101 Broadway Richmond 94804	(510)232-6611	
Human Services	1305 Macdonald Ave Richmond 94801	(877)505-4630	
Catholic Charities	3540 Chestnut Ave Concord 94519	(925)825-3099	
Salvation Army	3950 Clayton Rd Concord 94521	(925)676-6180	
Shelter, Inc.	1815 Arnold Dr Martinez 94553	(925)957-7579	

<b>EL DORADO COUNTY</b>			
<b>Housing Resources</b>			
Progress House	2844 Coloma St Placerville 95667	(530)626-9240	M/W/C
Hope House	3500 Missouri Flat Placerville 95667	(530)622-3231	W/C
United Outreach	6940 Perks Ct Placerville 95667	(530)622-8533	
<b>Food / Clothing Resources</b>			
St. Theresa Church	1041 Lyons Ave S. Lake Tahoe 96150	(530) 544-3533	
Calvary Chapel	3757 Hwy 193 Greenwood 95635	(530)823-1622	
Sierra Church	1165 Sierra Blvd S. Lake Tahoe 96150	(530)544-7055	
St. Patrick Upper	1868 Broadway Placerville 95667	(530)621-7730	

First Baptist Church	6361 Pony Exp Pollock Pines 95726	(530)644-2133	
G. Valley Church	3500 Missouri Flat Placerville 95667	(530)622-3231	
St. Patrick's Closet	3109 Sacramento St Placerville 95667	(530)621-7773	
Family Center	3501 Spruce St S. Lake Tahoe 96150	(530)542-0740	
<b>Substance Abuse Treatment</b>			
VA Nor-Cal HCS	10535 Hospital Way Mather 95655	(800)382-8387	V
Health/ AOD Svc	1360 Johnson Blvd S. L. Tahoe 96150	(530)573-7970	
Public Health	941 Spring St Placerville 95667	(530)621-6185	
Progress House .	PO Box 1666 Placerville 95667	(530)626-9240	M/F/C
Tribal Health	5168 Honpie Rd Placerville 95667	(530)387-4975	NA
New Morning	6765 Green Valley Rd Placerville 95667	(530)622-5551	F
Vitality Lake Tahoe	921 Macinaw Rd S. Lake Tahoe 96150	(530)541-5440	
Vitality Lake Tahoe	1137 Emerald Bay S.L Tahoe 96150	(530)541-5190	
Turning Point Inc	2494 Lake Tahoe Blvd S.L.T. 96151	(530)541-4594	
<b>Employment / Financial Assistance</b>			
One-Stop Center	3047 Briw Rd Placerville 95667	(530)642-4850	
One-Stop Center	3368 Lake Tahoe Blvd S.L.T. 96150	(530)573-4330	
Depart of Rehab	1166 Broadway #S Placerville 95667	(530)626-0900	
Depart of Rehab	2489 Lake Tahoe Blvd S.L.T.96150	(530)541-3226	
Health/Human Svc	3057 Briw Rd Placerville 95667	(530)642-7300	

<b>FRESNO COUNTY</b>			
<b>Emergency Housing</b>			
Unique Families	3457 W. S Fresno 93711	(559)230-1028	
Rescue Mission	310 G St. Fresno 93706	(559)268-0839	
Shepherd De Witt	898 N. Dewitt Ave Clovis 93611	(559)323-8495	
Evangel Home Inc	137 N. Yosemite Ave Fresno 93701	(559)264-4714	W/C
Naomis House	445 "F" St Fresno 93706	(559)443-1531	W
Thompson House	3545 W. Michigan Fresno 93722	(559) 871-0326	
Lujan Houses	19622 TollHouse Rd Clovis 93619	(209)489-2960	
<b>Transitional Housing</b>			
Sanctuary Living	1046 T St. Fresno 93721	(559)268-1045	
Turning Point	2369 South "G" St Fresno 93721	(559)233-0515	
Turning Point	1638 L St Fresno 93721	(559)233-2663	
Povarello House	412 F St Fresno 93726	(559)498-6988	
A. Lujan Programs	P.O. Box 840 San Martin 95046	(559)322-1010	
Decision Home	805 N. Echo St Fresno 93728	(559)498-0381	
Westcare	3636 E. Eugenia Fresno 93725	(559)237-3420	
<b>Food / Clothing Resources</b>			
Povarello House	412 F St Fresno 93726	(559)498-6988	
Salvation Army	1752 Fulton St Fresno 93721	(559)233-0138	
Food Bank	3403 E. Central Ave Fresno 93725	(559)237-3663	
<b>Substance Abuse Treatment</b>			

VA Fresno HCS	2615 E. Clinton Ave Fresno 93703	(559)225-6100	V
Behavioral Health	4441 E. Kings Canyon Fresno 93702	(559)253-9180	
Indian Health	1535 E. Shaw Ave #105 Fresno 93710	(559)320-0490	
Povarello House	412 F St Fresno 93726	(559)498-6988	
C-Addiction program	2445 W. Whites Bridge Fresno 93706	(559)264-5096	
MH Hacienda Site	2550 W. Clinton Ave Fresno 93705	(559)264-7521	W/C
Westcare	2772 S. MLK Blvd Fresno 93706	(559)265-4800	
S. A. Rehab Center	811 S. Parallel Ave Fresno 93721	(559)490-7020	
King of Kings	2302 MLK Jr. Blvd Fresno 93706	(559)442-0400	
King of Kings	2267 S. Geneva Ave Fresno 93706	(559)266-6449	M
Recycling Lives	P.O. Box 786 Fresno 93721	(559)237-1571	
Spirit of the Woman	327 W. Belmont Ave Fresno 93728	(559)233-4353	W/C
The Light House	2930 N. Blackstone Ave Fresno 97310	(559)222-4824	W/C
Turning Point Inc.	1642 "L" St Fresno 93721	(559)233-2663	
Rescue the Children	2141 N. Pkwy Fresno 93705	(559)227-2190	W/C
<b>Employment Assistance</b>			
Depart of Rehab	2550 Mariposa Mall# 2000 Fresno 93721	(559)445-6011	
Goodwill Industries	6437 N. Blackstone Fresno 93710	(559)224-0162	
Work-Force Connect	1511 9th St Firebaugh 93622	(559)230-4011	
Work-Force Connect	3302 N. Blackstone #155 Fresno 93726	(559)230-3600	
Work-Force Connect	655 Quince St Ste C Mendota 93640	(559)655-3081	
Work-Force Connect	1680 E. Manning Reedley 93654	(559)637-2444	
Proteus Inc	1815 Van Ness Ave Fresno 93271	(559)499-2140	
Voc Rehab	855 "M" Street Ste 980 Fresno 93721	(559)443-1491	
<b>Legal / Financial Assistance</b>			
AA Legal Services	3026 E. McKinley Ave Fresno 93703	(559)264-1290	
Attorney Referrals	1221 Van Ness Ave #300 Fresno 93721	(559)264-0137	
Cal Legal Services	2115 Kern St, Ste 1 Fresno 93721	(559)570-1200	
Ed. Opportunity Ctr.	5241 N. Maple Ave Fresno 93740	(559)278-2280	
Citizen/Immigration	1177 Fulton Mall Fresno 93721	(800)375-5283	
Catholic Charities	149 N. Fulton St Fresno 93701	(559)237-0851	
Social Services	2134 Fresno St Ste 100 Fresno 93721	(877)600-1377	

<b>GLENN COUNTY</b>			
<b>Housing / Food / Clothing Resources</b>			
Westside DV Shelter	4209 County Rd E. Orland 95963	(530)865-4903	
Resource Center	604 E. Walker St Orland 95963	(530)865-1165	
Resource Center	420 E. Laurel St Willows 95988	(530)934-6514	
<b>Substance Abuse Treatment</b>			
VA Chico OPC	280 Cohasset Rd Chico 95926	(530)879-5000	V
Health Services	1187 E. South St. Orland 95963	(530)865-1146	
Indian Health Clinic	207 N. Butte St Willows 95988	(530)934-4641	NA
Mental Health Svc	242 N. Villa Willows 95988	(530)934-6582	

<b>Employment / Legal / Financial Assistance</b>			
VSO	525 W. Sycamore #A5 Willows 95988	(530) 934-6524	
Starting Over Strong	P.O. Box 2104 Willows 95988	(530)867-3296	
Resource Center	604 E. Walker St Orland 95963	(530)865-1165	
Resource Center	420 E. Laurel St Willows 95988	(530)934-6514	

<b>HUMBOLDT COUNTY</b>			
<b>Emergency Housing</b>			
Arcata House	1005 11 <sup>th</sup> St Arcata 95521	(707)633-6236	
DV Services	PO Box 969 Eureka 95501	(707)444-9255	
Family Resource Ctr.	1450 Hiller Rd McKinleyville 95519	(707)840-0905	
WISH, INC	PO Box 642 Garberville 95542	(707)923-4100	W/C
Karuk Tribe Services	64236 2nd Ave Happy Camp 96039	(530)627-3106	NA
Community Services	2331 Rohnerville Rd Fortuna 95540	(707)725-1166	
<b>Transitional Housing</b>			
North Coast VRC	109 4 <sup>th</sup> St Eureka 95501	(707)442-4322	V
Arcata House Partner	1005 11 <sup>th</sup> St Eureka 95521	(707)822-4528	
Serenity Inn	2109 Broadway Eureka 95501	(707)442-4815	
<b>Food / Clothing Resources</b>			
Presbyterian Church	43 Maple Lane Garberville 95542	(707)923-3295	
Community Services	2331 Rohnerville Rd Fortuna 95540	(707)725-1166	
St Vincent De Paul	35 W 3 <sup>rd</sup> St Eureka 95501	(707)445-9588	
St Vincent De Paul	513 K St Arcata 95521	(707)822-6946	
Salvation Army	2123 Tydd St Eureka 95501	(707)442-6475	
Food For People	307 W. 14 <sup>th</sup> St Eureka 95501	(707)445-3166	
Community Church	712 Main St Ferndale 95536	(707)786-4475	
Indian Health Svc	1600 Weeot Way Arcata 95521	(707)825-5000	
Family Resource Ctr.	1450 Hiller Rd McKinleyville 95519	(707)840-0905	
Advent Com Services	2331 Rohnerville Rd Fortuna 95540	(707)725-1166	
St Joseph's Center	2292/2312 Newburg Rd Fortuna 95540	(707)725-1216	
Presbyterian Church	43 Maple Lane Garberville 95542	(707)923-3295	
Mateel Com. Center	59 Rusk Lane Redway 95560	(707)923-3368	
Food Distribution	12511 State Hwy 96 Hoopa 95546	(707)625-4646	
<b>Substance Abuse Treatment</b>			
Eureka VA Clinic	930 W. Harris St Eureka 95501	(707)269-7500	V
Mental Health Svc	507 F St Eureka 95501	(707)441-5400	
Health Services	908 7 <sup>th</sup> St Eureka 95501	(707)441-5087	
Redwood Vet Center	2830 G St Eureka 95501	(707)444-8271	
Behavioral Health	2370 Buhne St Eureka 95501	(707)442-5721	
AOD Care Services	2109 Broadway St Eureka 95501	(707)445-1391	
Crossroads	1205 Myrtle Ave Eureka 95501	(707)445-0869	
Humboldt Recovery	1024 N St Eureka 95501	(707)444-6262	

County AOD Svc	720 Wood St Eureka 95501	(707)476-4054	
Bonnie Brown	1742 J St Eureka 95501	(707)444-2232	W
Lee Brown AOD	217 14th St Eureka 95501	(707)268-0264	M
Singing Trees	2061 US Hwy 101 Garberville 95542	(707)247-3495	M/W
Brown Programs	1321 C Street Eureka 95501	(707)445-1391	
<b>Employment Assistance</b>			
The Job Market	409 K Street Eureka 95501	(707)441-5627	
The Job Market	1520 City Ctr. Rd McKinleyville 95519	(707)447-5627	
Employment Center	930 6 <sup>th</sup> St Eureka 95501	(707)441-4600	
Depart of Rehab	1330 Bayshore Way Eureka 95501	(707)445-6300	
Indian Dev Council	241 F St Eureka 95501	(707)445-8451	NA
<b>Legal / Financial Assistance</b>			
Homeless Court Svc	517 3 <sup>rd</sup> St Eureka 95501	707-445-7256	
Indian Legal Service	324 F St Eureka 95501	(707)443-8397	NA
Nor-Cal Legal Svc	123 3 <sup>rd</sup> St Eureka 95501	(707)445-0866	
Social Services	929 Koster St Eureka 95501	(877)410-8809	
Tribal Social Service	525 7 <sup>th</sup> St Eureka 95501	(707)445-2422	NA
Tribal TANF	620 C St Eureka 95501	(707)476-0344	NA

<b>IMPERIAL COUNTY</b>			
<b>Housing / Food Resources</b>			
Catholic Charities	250 W. Orange El Centro 92243	(760)370-3914	W
Catholic Charities	1948 W. Orange Ave El Centro 92243	(760)352-1182	W/C
Salvation Army	375 N. 5th St El Centro 92243	(760)352-4528	M
Neighborhood house	506 4th St Calexico 92231	(760)357-6875	W/C
Family Solutions	727 Main St El Centro 92243	(760)353-6922	
New Creations	P.O. Box 4478 El Centro 92243	(760)482-5900	M
Food Bank	329 Applestill Rd El Centro 92243	(760)370-0966	
Quechan Food Svc	1890 S Pasqual Rd Winterhaven 92283	(760)572-0740	
<b>Substance Abuse Treatment</b>			
VA Imperial Valley	1600 S Imperial Ave El Centro 92243	(760)352-1506	V
County Health Dept	797 Main St Ste A El Centro 92243	(760)482-2998	
County AOD	1395 State St El Centro 92243	(760)337-3069	
Mental Health	202 N. 8th St El Centro 92243	(760)482-4000	
Victory Outreach	266 W. Hwy 86 Brawley 92227	(760)344-5332	
United Way	P.O. Box 1924 El Centro 92244	(760)355-4900	
<b>Employment Assistance</b>			
One-Stop Center	860 Main St Brawley 92227	(760)344-2131	
One-Stop Center	301 Heber Ave Calexico 92231	(760)768-7171	
One-Stop Center	1550 W. Main St El Centro 92243	(760)339-2722	
Career Center	2695 S. 4 <sup>th</sup> St El Centro 92243	(760)337-5000	
Employment Center	294 S. 3rd St El Centro 92243	(760)337-6565	
ROP	687 State St El Centro 92243	(760)482-2600	
Independence	400 Mary Ave Calexico 92231	(760)768-2044	



<b>Legal / Financial Assistance</b>			
Elder Law	939 W. Main St El Centro 92243	(760)353-0223	
Family Center	480 N. Imperial Ave Brawley 92227	(760)312-6095	
Social Security	2345 S. 2nd St Ste A El Centro 92243	(800)772-1213	
Social Services	2995 S. 4th St El Centro 92243	(760)337-6800	

<b>INYO COUNTY</b>			
<b>Housing / Food / Clothing Resources</b>			
A.C.C.	224 S. Main St Bishop 93514	(760)873-8557	
Salvation Army	621 W Line St Ste106 Bishop 93514	(760)872-2124	
<b>Substance Abuse Treatment</b>			
VA Tulare OPC	1050 N. Cherry St Tulare 93274	(559)684-8703	V
Alpine Center	375 E. Line St Bishop 93514	(760)873-4357	MH
Mental Health	162 Grove St Ste J Bishop 93514	(760)873-6533	
Public Health Dept	207A W. South St Bishop 93514	(760)873-7868	
<b>Employment Legal / Financial Assistance</b>			
EDD	1337 Rocking West Dr Bishop 93514	(760)873-7185	
Indian Legal Svc	873 N. Main St Ste 120 Bishop 93514	(760)873-3581	NA
Social Services	912 N. Main St Bishop 93514	(760)873-6533	

<b>KERN COUNTY</b>			
<b>Emergency Housing</b>			
The Women's Ctr.	134 S. China Lake Ridgecrest 93555	(760)371-1969	DV
Rescue Mission	816 E. 21st St Bakersfield 93305	(661)325-0863	
Bethany Services	1600 E. Truxtun Ave Bakersfield 93305	(661)322-9294	
<b>Transitional Housing</b>			
Panacea Services	2105 F St Bakersfield 93301	(661)323-4357	
Positive Visions	1118 Pacific St Bakersfield 93305	(661)321-0558	
Turning Point	1101 Union Ave Bakersfield 93307	(661)325-5774	
Salvation Army	120 19 <sup>th</sup> St Bakersfield 93301	(661)325-2605	
Believers In Jesus	600 Planz Rd Bakersfield 93307	(661)834-0993	M
House of David	1311 Washington Bakersfield 93308	(661)549-9752	M
Tehillah Ministries	1028 Kern St Bakersfield 93305	(661)871-4458	M
Integrity House	105 Bloomquist Dr Bakersfield 93309	(661)978-4826	M
Focus Sober Living	730 S. Haley St Bakersfield 93307	(661)374-4969	M
Terra Lynn House	2309 San Marino Bakersfield 93309	(661)304-8947	W
Women of Worth	2500 Olmo Ct Bakersfield 93309	(661)832-8075	
<b>Food / Clothing Resources</b>			
Hope Center	3311 Manor St Bakersfield 93308	(661)399-2119	
Resource Center	410 E. Perkins Ave McFarland 93250	(661)792-1883	
Salvation Army	151 N. Downs St Ridgecrest 93555	(760)375-7219	
Salvation Army	213 East E St Tehachapi 93561	(661)823-9508	
Empire Gleaners	1326 30th St Bakersfield 93301	(661)324-2767	

<b>Substance Abuse Treatment</b>			
VA Kern OPC	1801 Westwind Dr Bakersfield 93301	(661)632-1800	V
Mental Health	2525 N. Chester # C Bakersfield 93308	(661) 868-1840	
Public Health	1800 Mt. Vernon Bakersfield 93306	(661)868-0502	
Vet's Foundation	729 Decatur St Ste 1 Bakersfield 93308	(661)399-2490	
WestCare	2901 South H St Bakersfield 93301	(661)326-0485	
Jason's Retreat	600 Bernard St Bakersfield 93305	(661)325-8510	
Fresh Start	325 McCord Ave Bakersfield 93308	(661)399-5462	
Positive Beginning	2350 S. Chester Ave Bakersfield 93301	(661)703-5577	
Panacea Services	2105 F St Bakersfield 93301	(661)323-4357	
Salvation Army	120 19th St Bakersfield 93301	(661)325-8626	
Salvation Army	4417 Wilson Rd Bakersfield 93309	(661)836-8487	
Kennemer Center	1100 Union Ave Bakersfield 93307	(661)861-6111	
Redempt Beginnings	2429 19th St Bakersfield 93301	(661)859-0967	M
Safe Haven	2625 Pacheco Rd Bakersfield 93307	(661)832-6835	M
Bethany Ministries	1200 Baker St Bakersfield 93305	(661)633-1200	
<b>Employment Assistance</b>			
Career Center	6401 Lake Isabella Lake Isabella 93240	(760)379-2074	
Depart of Rehab	1400 N. Norma St Ridgecrest 93555	(760)446-2523	
Goodwill Industries	4901 Stine Rd Bakersfield 93309	(661)837-0595	
Goodwill Industries	902 Main St Delano 93215	(661)725-6125	
Goodwill Industries	880 N. China Lake Ridgecrest 93555	(760)375-4848	
Training Resource	1600 E. Belle Ter. Bakersfield 93307	(661)635-2680	
<b>Legal / Financial Assistance</b>			
Legal Assistance	615 California Ave Bakersfield 93304	(661)325-5943	
Taft Needs Center	518 Main St Taft 93268	(661)763-4888	
Indigent Program	1700 Mt. Vernon Ave Bakersfield 93305	(661)326-2392	
Catholic Charities	825 Chester Ave Bakersfield 93301	(661)281-2130	
Human Services	100 E. California Ave Bakersfield 93307	(661)631-6000	

<b>KINGS COUNTY</b>			
<b>Housing Resources</b>			
Salvation Army	380 E. Ivy St Hanford 93230	(559)582-4434	
Holiday Lodge	8749 E. Lacey Blvd Hanford 93230	(559)582-1006	
Andy's House	801 W. 7th St Hanford 93230	(559)583-2035	M
Hannah's House	222 W. Keith St Hanford 93230	(559)583-7800	W/C
Salvation Army	1914 Fulton St Fresno 93721	(559)233-0139	W/C
<b>Food / Clothing Resources</b>			
Salvation Army	380 E. Ivy St Hanford 93230	(559)582-4434	
St. Vincent De Paul	115 W. 5th St Hanford 93230	(559)582-3763	
Episcopal Church	519 N. Douty St Hanford 93230	(559)584-7706	
<b>Substance Abuse Treatment</b>			
VA Tulare OPC	1050 N. Cherry St Tulare 93274	(559)684-8703	V

Public Health Dept	330 Campus Dr Hanford 93230	(559)584-1401	
Champions	700 N. Irwin St Hanford 93202	(559)583-9300	
Tule River Program	1010 N. Reservation Porterville 93257	(559)781-8797	
Kings Counseling	1393 Bailey St Hanford 93230	(559)582-4481	
<b>Employment / Legal / Financial Assistance</b>			
One Stop Job Ctr.	124 N. Irwin St Hanford 93230	(559)585-3532	
Human Services	520 Fresno St Avenal 93204	(559)386-1242	
Human Services	951 Chittenden Ave Corcoran 93212	(800)289-9981	
Social Services	1400 W. Lacey Blvd Hanford 93230	(559)582-3241	
S J Valley Veterans	410 E. 7 <sup>th</sup> St. Hanford 93230	(559)584-8100	

LAKE COUNTY			
<b>Emergency Housing</b>			
Family Center	5350 Main St Kelseyville 95451	(707)279-0563	DV
<b>Food / Clothing Resources</b>			
St. Vincent de Paul	14435 Uhl Ave Clearlake 95422	(707)995-1724	
Alpine Senior Center	3985 Country Club Dr Lucerne 95458	(707)274-8779	
Salvation Army	14420 Lakeshore Dr Clearlake 95422	(707)995-1128	
St. John's Church	1190 N. Forbes St Lakeport 95453	(707)263-4785	
United Church	14521 Pearl Ave Clearlake 95422	(707)994-2134	
Calvary Chapel	14330 Memory Lane Clearlake 95422	(707)994-5683	
United Church	16255 2nd St Lower Lake 95457	(707)994-2507	
Methodist Church	15833 Armstrong St Middleton 95461	(707)987-3379	
<b>Substance Abuse Treatment</b>			
VA Clearlake OPC	15145 Lakeshore Dr Clearlake 95422	(707)995-7200	V
Hilltop Recovery	10155 Socrates Rd Middletown 95461	(707)987-9972	V
Behavioral Health	6302 13th Ave Lucerne 95458	(707)274-9101	
Behavioral Health	7000-B S. Center Dr Clearlake 95422	(707)994-6494	
Public Health	922 Bevins Ct Lakeport 95453	(707)263-1090	
Com. Health Clinic	5335 Lakeshore Blvd Lakeport 95453	(707)263-7725	
<b>Employment / Legal / Financial Assistance</b>			
Workforce One Stop	55 First St Box F Lakeport 95453	(707)263-0630	
Self-Help Law Ctr.	380 N. Main St Ste J Lakeport 95453	(707)994-6598	
Social Services	14954 Burns Valley Rd Clearlake 95422	(707)995-4200	
Social Services	15975 Anderson Pkwy L. Lake 95457	(707)995-4200	

LASSEN COUNTY			
<b>Emergency Housing</b>			
Family Services	1306 Riverside Dr Susanville 96130	(530)257-4599	DV
Crossroads Ministry	2410 Main St Susanville 96130	(530)251-0701	
<b>Food / Clothing Resources</b>			
Food Bank	P.O. Box 219 Susanville 96130	(530)257-4884	

C.A.A.	P.O. Box 319 Quincy 95971	(530) 283-2466	
Salvation Army	1560 Main St Susanville 96130	(530)257-0314	
Big Valley Center	125 E Hwy 299 Bieber 96009	(530)294-5700	
Westwood Center	463-975 Birch St Westwood 96137	(530)256-3706	
Fort Sage Center	170 D S St Herlong 96113	(530)827-3007	
<b>Substance Abuse Treatment</b>			
VA Diamond View	110 Bella Way Susanville 96130	(530)251-4550	V
AOD Program	1400 Chestnut St # A Susanville 96130	(530)251-8112	
Mental Health	555 Hospital Lane Susanville 96130	(530)251-8108	
Indian Health Center	795 Joaquin St Susanville 96130	(530)257-2542	NA
Public Health	1445 Bunyan Rd #B Susanville 96130	(530)251-8183	
<b>Employment / Legal / Financial Assistance</b>			
Career Network	1616 Chestnut St Susanville 96130	(530)257-5057	
Depart of Rehab	170 Russell Ave #B Susanville 96130	(530)257-6073	
C. A.A.	P.O. Box 319 Quincy 95971	(530)283-2466	
Social Services	720 Richmond Rd Susanville 96130	(530)251-8152	

<b>LOS ANGELES COUNTY</b>			
<b>Emergency Housing</b>			
Amistad de L.A.	3745 S. Grand Ave Los Angeles 90007	(213)743-9023	M/W
New Image Shelter	3804 S. Broadway Pl L.A. 90037	(323)231-1711	M/W
C. A.C.	10950 S. Central Ave L. A. 90059	(323)563-5639	M/W
Midnight Mission	601 S. San Pedro St L.A. 90014	(213)624-9258	M
Los Angeles Mission	303 E. 5th St Los Angeles 90013	(213)629-1227	M
Beacon Light Miss.	525 Broad Ave Wilmington 90744	(310)830-7063	M
Door of Hope	525 Broad Ave Wilmington 90744	(310)518-3667	W
LB Rescue Mission	1335 Pacific Ave Long Beach 90813	(562)591-1292	M
S. Monica Shelter	505 Olympic Blvd Santa Monica 90401	(310)450-7235	M
Catholic Charities	44611 Yucca Ave Lancaster 93584	(661)945-7524	M/W
Tabernacle Ministry	16301 W. Sierra Hwy C. Country 91351	(661)252-5087	M
<b>Transitional Housing</b>			
Villages at Cabrillo	2001 River Ave Long Beach 90810	(562)200-7300	V
US VETS	733 S. Hindry Ave Inglewood 90301	(310)348-7600	V
US VETS	2001 River Ave Long Beach 90810	(562)388-7982	V
V. O. A.	544 S. San Pedro St L.A. 90013	(213)593-9001	V
Stepping Stone	3813 Hughes Ave Culver City 90232	(310)477-4428	M
Help is on the Way	5821 West Blvd Los Angeles 90043	(323)293-9545	M/W
Hope Again	5121 W Sunset Blvd L. A. 90027	(323)661-4004	M/W
Puente House	444 W. Badillo Covina 91723	(626)967-1819	M/W
S. Army Bell Shelter	5600 Rickenbacker Rd Bell 90201	(323)263-1206	M/W
Turning Pt Center	1453 16th St Santa Monica 90404	(310)828-6717	M/W
A New Way of Life	P.O. Box 875288 Los Angeles 90087	(323)563-3575	W/C
Casa de Las Amiga	160 N. El Molino Ave Pasadena 91101	(626)792-2770	W
Hoffman House	940 Dawson Ave Long Beach 90804	(562)434-0036	W
House of Hope	235 W. 9th St San Pedro 90731	(877)403-8016	W

Progress House	1714 Arlington Ave Torrance 90501	(310)543-1212	M
Primary Purpose	6709 Vesper Ave Van Nuys 91405	(818)612-1439	M
HOW House	14100 1/2 Glengyle St Whittier 90604	(562)777-1222	M
Into Action	1128 E. Ave "J" Lancaster 93535	(661)951-2042	M
New Harvest	11364 E. Imperial Hwy Norwalk 90650	(562)929-6034	M
Solution For Life	946 Maine Ave Long Beach 90813	(562)436-5090	M
The Garden	433 W. Manchester Inglewood 90301	(310)695-7292	M
Catholic Charities	44611 Yucca Ave Lancaster 93584	(661)945-7524	M/F
<b>Food / Clothing Resources</b>			
Catholic Charities	123 E 14th St Long Beach 90813	(562)591-1351	
St. Francis Center	1835 S. Hope St Los Angeles 90015	(213)747-5347	
All Peoples Center	822 E. 20th St Los Angeles 90011	(213)747-6357	
Fred Jordan Mission	445 Towne Ave Los Angeles 90013	(626)915-1981	
Salvation Army	490 East La Verne Ave Pomona 91767	(909)623-1579	
SA Emergency Svc	1002 E. Ave Q-12 Palmdale 93550	(661)267-5191	
Foothill Unity Center	191 N. Oak Ave Pasadena 91107	(626)584-7420	
Lutheran Services	6425 Tyrone Ave Van Nuys 91401	(818)901-9480	
Tujunga Church	9901 Tujunga Cn Blvd Tujunga 91042	(818)473-4185	
Valley Oasis	P. O. Box 2980 Lancaster 93539	(661)945-6736	
<b>Substance Abuse Treatment</b>			
VA Downtown Clinic	351 E. Temple St Los Angeles 90012	(877)252-4866	V
Health Services	600 S. Commonwealth Ave L.A. 90057	(213)639-6415	
Phoenix House	503 Ocean Front Walk Venice 90291	(800)378-4435	M
S.A. Rehab Center	1370 Alamitos Ave Long Beach 90813	(562)218-2355	M
New Directions Inc	11303 Wilshire Blvd L. A. 90073	(310)914-4045	V
Weingart Center	566 S. San Pedro St L. A. 90013	(213)627-9000	M/W
Rena B	4445 Burns Ave Los Angeles 90029	(323)664-8940	co-ed
Amistad de L. A.	3745 Grand Ave Los Angeles 90007	(213)743-9023	M/W
S. A. Rehab Center	56 W. Del Mar Blvd Pasadena 91105	(626)795-8075	M/W
Socorro Program	2010 N. Lincoln Park Ave L. A. 90031	(323)222-1440	M/W
Mount Carmel	801 W. 70th St Los Angeles 90044	(323)759-0340	M/W
CRI-HELP	11027 Burbank N. Hollywood 91602	(818)985-8323	M/W
Fred Brown Svc	270 W. 14th St San Pedro 90731	(310)519-8723	M
FOTEP	12423 Dahlia Ave El Monte 91732	(626)258-0325	W/C
Foley House	10511 Mills Ave Whittier 90604	(562)944-7953	W/C
Tarzana	2101 Magnolia Ave Long Beach 90806	(562)218-1868	W/C
Crossroads	P.O. Box 15 Claremont 91711	(909)626-7847	W
Casa de Las Amiga	160 N. El Molino Ave Pasadena 91101	(626)792-2770	W
Casa Maria	691 E. Washington Pasadena 91104	(626)296-8689	W
Mini 12 Step House	303 E. 52nd St Los Angeles 90011	(323)232-6228	W/C
Oasis Treatment	13832 Polk St Sylmar 91342	(818)362-0986	W
Positive Steps	11501 Dolan Ave Downey 90241	(562)923-7894	M
Prototypes	845 E. Arrow Hwy Pomona 91767	(909)624-1233	W
Grandview	1230 N. Marengo Pasadena 91103	(626)797-1124	M
Allen House	10425 S. Painter S. Fe Springs, 90670	(562)906-2685	M/C
American Center	2180 W. Valley Blvd Pomona 91768	(909)865-2336	M/C
A. V. Rehab Center	30500 Arrastre Canyon Rd Acton 93510	(661)223-8800	M/W

FOCIS	11364 E Imperial Hwy Norwalk 90650	(562)807-6464	M/W
Beacon House	1003 S. Beacon St San Pedro 90731	(310)514-4940	M
Castle Program	3021 S. Vermont Los Angeles 90007	(323)732-9124	M/W
Rainbow Outreach	11419 Carmenita Rd Whittier 90605	(562)944-2283	M
<b>Employment Assistance</b>			
Depart of Rehab	3333 Wilshire Blvd Los Angeles 90010	(213)736-3904	
Transition Center	3447 Atlantic Ave Long Beach 90807	(562)570-9675	
One Stop Center	1420 West Ave Lancaster 93534	(661)726-4128	
Work Source Center	1207 E. Green St Pasadena 91106	(626)304-7922	
Goodwill Industries	800 W. Pacific. Coast Hwy L.B. 90806	(562)435-8214	
Friends Outside	464 E. Walnut St Pasadena 91101	(626)795-7607	
Ex-Offender Net-wk	5801 S. San Pedro Los Angeles 90011	(323)238-0445	
Jericho Training Ctr	3221 N. Alameda St Compton, 90222	(323)242-5000	
<b>Legal / Financial Assistance</b>			
Legal Aid	601 Pacific Ave Long Beach 90802	(562)435-3501	
Inner City Law Ctr.	1309 E. 7th St Los Angeles 90021	(213)891-2880	
Re-Entry legal clinic	10957 S. Central Ave L.A. 90059	(323)357-8431	
Weingart Center	566 S. San Pedro St L.A. 90013	(213)627-9000	
Social Services	17600 S Santa Fe Ave Compton 90221	(310)761-2353	

<b>MADERA COUNTY</b>			
<b>Housing / Food / Clothing Resources</b>			
Rescue Mission	1305 Clinton St Madera 93638	(559)675-8321	M/W/C
Hope House	117 North R St Ste 103 Madera 93637	(559)664-9021	
Food Bank	225 S. Pine St Ste #101 Madera 93637	(559)674-1482	
Manna House	40390 Junction Dr Oakhurst 93644	(559)683-6262	
<b>Substance Abuse Treatment</b>			
VA Fresno HCS	2615 E. Clinton Ave Fresno 93703	(559)225-6100	V
Public Health	14215 Rd 28 Madera 93638	(559)675-7893	
Behavioral Health	209 E. 7th St Madera 93637	(559)673-3508	
<b>Employment / Legal / Financial Assistance</b>			
Workforce Center	441 E. Yosemite Ave Madera 93638	(559)662-4500	
Social Services	125 S. 2nd St Chowchilla 93610	(559)665-0205	
Social Services	700 E. Yosemite Ave Madera 93639	(559)675-7841	
Social Services	41969 Hwy 41 Ste "B" Oakhurst 93644	(559)683-6263	
C. A. P	40601 Rd 274 Bass Lake 93604	(559)658-8588	
C. A. P	1225 Gill Ave Madera 93637	(559)673-9173	

<b>MARIN COUNTY</b>			
<b>Emergency Housing</b>			
Homeward Bound	1385 N. Hamilton Pkwy Novato 94949	(415)454-7418	V
Mill Street Center	190 Mill St San Rafael 94901	(415)457-9651	
Center for Peace	734 A St. San Rafael 94901	(415)457-2464	W

<b>Transitional Housing</b>			
Center for Peace	734 A St San Rafael 94901	(415)457-2464	W
Homeward Bound	190 Mill St San Rafael 94901	(415)457-9651	V
Center Point	603 D St San Rafael 94901	(415)454-9444	
Gateways Living	PO Box 405 Novato 94948	(415)892-6852	M/W
HB Family Center	430 Mission Ave San Rafael 94901	(415)457-2115	
<b>Food / Clothing Resources</b>			
Christian Fellowship	131 Filbert St Sausalito 94965	(415)332-0201	
Ritter Center	16 Ritter St San Rafael 94901	(415)457-8182	
St. Vincent de Paul	820 B St San Rafael 94901	(415)454-3303	
Salvation Army	351 Mission Ave San Rafael 94901	(415)459-4520	
Food Bank	75 Digital Dr Novato 94949	(415)883-1302	
<b>Substance Abuse Treatment</b>			
VA SF Medical Ctr.	4150 Clement St San Francisco 94121	(415)221-4810	V
Health Services	120 N. Redwood Dr San Rafael 94903	(415)473-3400	
Mental Health	20 N. San Pedro San Rafael 94903	(415)499-6769	
Center Point AOD	135 Paul Dr San Rafael 94903	(415)456-6655	
Marin Services	1005 A St Ste 209 San Rafael 94901	(415)485-6736	M
<b>Employment / Legal / Financial Assistance</b>			
On Stop Center	120 N. Redwood Rd San Rafael 94903	(415)473-3330	
Depart of Rehab	75 Rowland Way #370 Novato 94945	(415)893-7702	
Ritter Center	16 Ritter St San Rafael 94901	(415)457-8182	
Social Services	120 N. Redwood Dr San Rafael 94903	(415)473-3400	
Human Needs Ctr	1907 Novato Blvd Novato 94947	(415)897-4147	

<b>MARIPOSA COUNTY</b>			
<b>Emergency / Food / Clothing Resources</b>			
Mtn.. Crisis Svc	5079 Hwy 140 Mariposa 95338	(209)742-5865	DV
Open Arms		(209) 966-3419	
Manna House	5127 Charles St Mariposa 95338	(209)742-7985	
<b>Substance Abuse Treatment</b>			
VA Oakhurst OPC	40597 Westlake Dr Oakhurst 93644	(559)683-5300	V
Public Health	5085 Bullion St Mariposa 95338	(209)966-3689	
<b>Employment / Financial Assistance</b>			
Job Connection	5362 Lemee Lane Mariposa 95338	(209)966-6700	
Human Services	5186 Hwy 49 North Mariposa 95338	(209)966-2000	

<b>MENDOCINO COUNTY</b>			
<b>Emergency Housing</b>			
Buddy Eller Center	201 Brush St Ukiah 95482	(707)462-6290	
Hospitality House	237 N. McPherson St Ft. Bragg 95437	(707)961-1150	
Salvation Army	714 S. State Ste A Ukiah 95482	(707)468-9577	W/C
<b>Transitional Housing</b>			

Ford Street Project	139 Ford St Ukiah 95482	(707)462-1934	
Salvation Army	237 N. McPherson St Ft Bragg 95437	(707)961-1150	
<b>Food / Clothing Resources</b>			
Hospitality Center	468 S. Franklin St # E Ft Bragg 95437	(707)961-0172	
Food Bank	910 N. Franklin St Ft Bragg 95437	(707)964-9404	
Community Center	888 N. State St Ukiah 95482	(707)462-8879	
Community Svc	229 E. San Francisco St Willits 95490	(707)459-3333	
Daily Bread	58 Bush St Willits 95490	(707)459-3947	
Salvation Army	714 S. State Ste A Ukiah 95482	(707)468-9577	
Plowshares Center	1346 S. State St Ukiah 95482	(707)462-8582	
<b>Substance Abuse Treatment</b>			
VA Ukiah OPC	630 Kings Ct Ukiah 95482	(707)468-7700	V
AOD Services	1120 S. Dora St Ukiah 95482	(707)472-2637	
Health Services	825 S. Frankin St Ft Bragg 95437	(707)962-1000	
Health Services	221 S. Lenore Ave Willits 95490	(707)456-3700	
<b>Employment Assistance</b>			
One-Stop Center	310 E. Redwood Ave Ft. Bragg 95437	(707)964-3218	
One-Stop Center	631 S. Orchard Ave Ukiah 95482	(707)467-5900	
Goodwill	1728 S. Main St Willits 95490	(707)456-9461	
Career Center	18200 Mtn. View Rd Boonville 95415	(707)895-2146	
Depart of Rehab	625 Kings Ct, Ste A Ukiah 95482	(707)463-4791	
<b>Legal / Financial Assistance</b>			
Nor-Cal Legal Svc	421 N. Oak Street Ukiah 95482	(707)462-1471	
Social Security	521 S. Orchard Ave Ukiah 95482	(888)590-2706	
Social Services	825 S. Franklin St Ft. Bragg 95437	(707)962-1000	
Social Services	221 S. Lenore Avenue Willits 95490	(707)456-3700	

<b>MERCED COUNTY</b>			
<b>Housing Resources</b>			
Catholic Charities	336 W. Main St #1 Merced 95340	(209)383-2494	
Rescue Mission	1921 Canal St Merced 95348	(209)722-9269	M
Valley Crisis (DV)	1960 P St Merced 95340	(209)725-7900	W/C
C. A. A.	1235 W. Main St Merced 95344	(209)723-4565	R
<b>Food / Clothing Resources</b>			
Catholic Charities	336 W. Main St #1 Merced 95340	(209)383-2494	
Harvest Time Food	1021 R St Merced 95341	(209)723-2395	
Salvation Army	1440 W.12th St Merced 95341	(209)383-4225	
<b>Substance Abuse Treatment</b>			
VA Merced OPC	340 E Yosemite Ave Merced 95340	(209)381-0105	V
Hobie House	1301 Yosemite Pkwy Merced 95340	(209)722-6335	M
Adult Treatment Svc	3090 M St Merced 95340	(209)381-6850	OP
Health Services	260 E. 15 <sup>th</sup> St Merced 95341	(209)381-1010	
Mental Health Svc	480 East 13 <sup>th</sup> St Merced 95341	(209)381- 6813	



Adult Treatment Svc	1471 B St Livingston 95334	(209)394-4032	OP
Adult Treatment Svc	40 G St Bldg 2 Los Banos 93635	(209)827-2185	OP
<b>Employment Assistance</b>			
EDD	1205 W.18th St Merced 95340	(209)726-5407	
Depart of Rehab	464 E. Yosemite Ave #A Merced 95340	(209)726-6529	
R. F.I.	710 W.18th St Ste 5 Merced 95340	(209)383-1683	
One Stop Center	800 7th St Los Banos 93635	(209)710-6140	
<b>Legal / Financial Assistance</b>			
Cal Legal Services	1640 N St. #200 Merced 95340	(209)723-5466	
Family Law	2260 N St Merced 95340	(209)725-4117	
Human Services	1471 B St Ste F Livingston 95334	(209)394-1680	
Human Services	415 F St Los Banos 93635	(209) 826-1821	
Human Services	2115 W. Wardrobe Ave Merced 95340	(209)385-3000	

<b>MODOC COUNTY</b>			
<b>Housing / Food / Clothing Resources</b>			
Teach Program	112 E. 2nd St Alturas 96101	(530)233-3111	
Food Bank	P.O. Box 219 Susanville 96130	(530)257-4884	
<b>Substance Abuse Treatment</b>			
VA Diamond View	110 Bella Way Susanville 96130	(530)251-4550	V
Mental Health/AOD	441 N. Main St Alturas 96101	(530)233-6312	
Strong Health Ctr.	1203 Oak St Alturas 96101	(530)233-4591	
<b>Employment / Legal / Financial Assistance</b>			
One Stop Center	221 N. Main S Alturas 96101	(530)233-4161	
Nor-Cal Legal Svc	1370 W. St Redding 96001	(530)241-3565	
Social Services	120 N. Main St Alturas 96101	(530)233-6501	

<b>MONO COUNTY</b>			
<b>Housing / Food / Clothing Resources</b>			
<b>(IMACA)</b>	224 S. Main St Bishop 93514	<b>(760)873-8557</b>	R
Iris Women's Svc	452 Old Mammoth M. Lakes 93546	(760)934-2491	R
<b>Substance Abuse Treatment</b>			
VA Fresno HCS	2615 E. Clinton Ave Fresno 93703	(559)225-6100	V
Behavioral Health	452 Old Mammoth Rd M. Lakes 93546	(760)924-1740	
<b>Employment / Financial Assistance</b>			
Career Center	107384 S. Hwy 395 Walker 96107	(530)495-1262	
Social Services	137 Emigrant Rd Bridgeport 93517	(760)932-5600	
Social Services	452 Old Mammoth Rd M. Lakes 93546	(760)924-1770	
Social Services	107384 US Hwy 395 Coleville 96107	(530)495-1262	

<b>MONTEREY COUNTY</b>			
<b>Emergency Housing</b>			
Dorothy's Place	30 Soledad St Salinas 93901	(831)757-3838	W
Victory Mission	43 Soledad St Salinas 93901	(831)424-5688	M
Shelter Outreach	P.O. Box 1340 Marina 93933	(831)384-3388	W/C
<b>Transitional Housing</b>			
V. T. C.	220 12th St Marina 93933	(831)883-8387	V
Homeward Bound	PO Box 1340 Marina 93933	(831)384-3388	W/C
<b>Food / Clothing Resources</b>			
Dorothy's Place	30 Soledad St Salinas 93901	(831)757-3838	
Salvation Army	2460 N. Main St Salinas 93906	(831)443-9655	
Victory Mission	43 Soledad St Salinas 93901	(831)424-5688	M
Food Bank	815 W. Market #5 Salinas 93901	(831)758-1523	
<b>Substance Abuse Treatment</b>			
VA Monterey	3401 Engineer lane Seaside 93955	(831)883-3800	V
Beacon House	468 Pine Ave Pacific Grove 93950	(831)372-2334	
Genesis House	1152 Sonoma Ave Seaside 93955	(831)899-2436	
Turning Point	116 E. San Luis St Salinas 93901	(831)422-9171	
MCHOME	220 12th. St Marina 93933	(831)883-3030	MH
Sun Street Center	8 Sun St Salinas 93901	(831)753-5145	
Sun Street OPS	11 Peach Dr Salinas 93912	(831)753-6001	
Health Depart	1270 Natividad Rd Salinas 93906	(831)647-7650	
<b>Employment Assistance</b>			
One-Stop Center	200A Broadway #62 King City 93930	(831)386-6801	
One-Stop Center	1760 Fremont Blvd Seaside 93955	(831)899-8236	
Depart of Rehab	928 E. Blanco Rd Salinas 93901	(831)769-8066	
Turning Point	115 E. San Luis St Salinas 93901	(831)422-8852	
<b>Legal / Financial Assistance</b>			
CTR	134 E. Rossi St Salinas 93902	(831)424-9186	
Catholic Charities	1705 2 <sup>nd</sup> St Salinas 93905	(831)753-5314	
Catholic Charities	922 Hilby Ave #C Seaside 93955	(831)393-3110	
Social Services	1000 S. Main St #208 Salinas 93901	(866)323-1953	

<b>NAPA COUNTY</b>			
<b>Housing / Food / Clothing Resources</b>			
Community Action	2310 Laurel St Napa 94559	(707)253-6100	
Emergency DV Svc	1141 Pear Tree Lane #220 Napa 94558	(707)252-3687	
Adult Shelter	100 Hartle Ct Napa 94559	(707)299-1739	
Hope Family Shelter	2521 Old Sonoma Rd Napa 94558	(707)259-8133	
Catholic Charities	1248 Hayes St Napa 94558	(707)224-4403	W/C
Food Bank	1 Angwin Ave Angwin 94508	(707)253-6128	
Salvation Army	590 Franklin St Napa 94559	(707)226-8150	
Food Pantry	1777 Main St Helena 94574	(707)963-5183	
<b>Substance Abuse Treatment</b>			

VA Mare Island OPC	201 Walnut Ave Vallejo 94592	(707)562-8200	V
Health Services	2344 Old Sonoma Rd Napa 94559	(707)253-4306	
Alt for Better Living	701 School St Napa 94559	(707)226-1248	OP
Hope Center	1301 Fourth St Napa 94559	(707)259-8133	
Duffy's	3076 Myrtledale Rd Calistoga 94515	(707)942-6888	
<b>Employment / Financial Assistance</b>			
Job Connection	650 Imperial Way #101 Napa 94558	(707)253-4134	
Depart of Rehab	1250 Main St #200 Napa 94559	(707)253-4924	
Human Services	2344 Old Sonoma Rd Napa 94559	(707)253-4279	
Social Services	2261 Elm St Napa 94558	(707)253-4511	
Social Security	1850 Soscol St Napa 94558	(800)772-1213	

<b>NEVADA COUNTY</b>			
<b>Housing / Food / Clothing Resources</b>			
DV/SA Coalition	960 Mccourtney Rd Grass Valley 95949	(530)272-3467	R
Salvation Army	10725 Alta St Grass Valley 95945	(530)274-3500	
211 Nevada County	950 Maidu Ave Nevada City 95959	(877)847-0499	R
CORR	180 Sierra College Dr G. Valley 95945	(530)273-9541	W/C
Food Bank	587 Sutton Way Grass Valley 95945	(530)272-3796	
<b>Substance Abuse Treatment</b>			
VA Sierra Foothills	11985 Heritage Oak Pl Auburn 95603	(530)889-0872	
Public Health	500 Crown Pt Cir Grass Valley 95945	(530)265-1450	
Hope House	159 Brent Wood Dr Grass Valley 95945	(530)271-1140	W/C
Serenity House	159 Brent Wood Dr Grass Valley 95945	(530)274-1466	M
CORR	10015 Palisades Dr #1 Truckee 96161	(530)587-8194	
Common Goals	727 Zion St Nevada City 95959	(530)265-2914	
Progress House I	145 Bost Ave Nevada City 95959	(530)626-9240	M
<b>Employment Assistance</b>			
One-Stop Center	715 Maltman Dr Grass Valley 95945	(530)265-7088	
One-Stop Center	10075 Levon Ave #105 Truckee 96161	(530)550-3015	
Depart of Rehab	380 Sierra College Dr G. Valley 95945	(530)477-2600	
<b>Legal / Financial Assistance</b>			
Social Services	10075 Levon Ave # 204 Truckee 96161	(530)582-7803	
Social Services	950 Maidu Ave Nevada City CA 95959	(530)265-1340	

<b>ORANGE COUNTY</b>			
<b>Emergency Housing</b>			
Veterans First	1540 E. Edinger Santa Ana 92705	(714)547-0615	V
Southwest Center	1601 W. 2nd St Santa Ana 92703	(714)547-4073	R
Salvation Army	818 E. 3 <sup>rd</sup> St. Santa Ana 92701	(714)542-9750	
Friendship Shelter	1335 S Coast Hwy L. Beach 92651	(949)494-6928	
H.I.S. House	907 N Bradford Ave Placentia 92870	(714)993-5774	
OCIS	1963 Wallace Costa Mesa 92627	(949)631-7213	

O C Rescue Mission	One Hope Dr Tustin 92782	(714)247-4300	
Thomas House	PO Box 2737 Garden Grove 92842	(714)647-7534	F
<b>Transitional Housing</b>			
Veterans First	1540 E. Edinger Santa Ana 92705	(714)547-0615	V
Crossroads	2515 West 1st St Santa Ana 92703	(714)547-8477	
NAti's House	1733 Valencia Santa Ana 92706	(714)267-7747	
Keystone	2152 Raleigh Costa Mesa 92626	(949)646-8222	M
McMillen House	681 Plumer St Costa Mesa 92627	(949)574-2505	M
S. C. Outreach	10175 Slater Fountain Valley 92708	(714)962-6673	
The Chateau	1687 W. Chateau Pl Anaheim 92802	(714)502-9973	W
Americana Mgt	130 S. Beach Blvd Anaheim 92804	(714)527-5626	Coed
American Family	15161 Jackson Midway City 92655	(714)897-3221	M/F/C
Five Points	18342 Patterson Lane H. Beach 92646	(714)313-8302	M
Owen House I	723 Owen Ave H. Beach 92648	(949)721-1511	
Owen House II	727 Owen Ave H. Beach 92648	(949)721-1511	
<b>Food / Clothing Resources</b>			
Salvation Army	7245 Garden Grove G. Grove 92843	(714)901-1480	
Coordinating Council	7957 Whitaker St Buena Park 90621	(714)521-3772	
Catholic Charities	3631 W. Warner Ave Santa Ana 92704	(714)668-1130	
Southwest Center	1601 W. 2nd St Santa Ana 92703	(714)547-4073	
Homeless Center	2416 S. Main St Santa Ana 92702	(714)668-1530	
Red Wagon Ministry	3800 S. Fairview Rd Santa Ana 92704	(714)979-4422	
Catholic Charities	1820 E. 16th St Santa Ana 92701	(714)347-9628	
St Vincent De Paul	124 N. Resh Anaheim 92805	(714)535-2742	
O C Rescue Mission	1 Hope Drive Tustin 92782	(714)247-4300	
Interfaith Services	525 Main St Huntington Beach 92648	(714)969-4462	
Mary' s Kitchen	517 W Struck Ave Orange 92867	(714)633-0444	
Living Waters	9801 Talbert Ave Fount Valley 92708	(714)963-8131	
Orange Church	2200 W. Orangethorpe Fullerton 92833	(714)871-3400	
Pathways of Hope	611 S. Ford Ave Fullerton 92833	(714)738-0255	
Cares Soup Kitchen	720 W. 19th St Costa Mesa 92627	(949)548-8861	
St Michaels Society	107 W. Marquita San Clemente 92672	(949)366-9480	
<b>Substance Abuse Treatment</b>			
VA Santa Ana OPC	1506 Brookhollow Dr Santa Ana 92705	(714)434-4600	V
Public Health	1825 W. 17 <sup>th</sup> St Santa Ana 92706	(714)567-6253	
Behavioral Health	405 W. 5 <sup>th</sup> St Rm 726 Santa Ana 92701	(714)834-6023	
Mental Health Svc	2035 E. Ball Rd Anaheim 92806	(714)517-6300	
S. Army Rehab Ctr.	1300 S. Lewis Anaheim 92805	(714)758-0414	
Casa Elena	832 S. Anaheim Blvd Anaheim 92805	(714)772-5580	W
Cooper Fellowship	409 N. Cooper St Santa Ana 92703	(714)554-1152	
Crossroads	2515 W. 1st St Santa Ana 92703	(714)547-8477	
Gerry House	1225 W 6th St Santa Ana 92703	(714)972-1402	
Phoenix House	1207 E. Fruit St Santa Ana 92701	(714)953-9373	
Victory Outreach	1414 E 4th St Santa Ana 92701	(714)586-0551	
The Villa	910 N. French St Santa Ana 92701	(714)541-2732	W

Indigent Medical Svc	800 N. Eckhoff Orange 92668	(866)979-6772	
Main Place	1140 N Tustin St Orange,92867	(714)505-1734	M
Psychological Svc	1234 W. Chapman #203 Orange 92868	(714)771-0722	
Roque Center	9842 W. 13th St Garden Grove 92844	(877)839-0607	
Unidos Recovery	9842 W. 13th St Garden Grove 92844	(714)531-4624	M
WJW Treatment Ctr.	13222 Chapman Garden Grove 92840	(714)703-9492	M
Nancy Clark & Ass.	471 Old Newport N. Beach 92663	(949)631-0550	
Woodglen Junction	771 W. Orangethorpe Fullerton 92832	(714)879-0929	
Yellowstone	154 E. Bay St Costa Mesa 92627	(888)941-9048	
New Directions	2607 Willo Lane Costa Mesa 92627	(800)939-6636	W
Newport Harbor	382 Hamilton St #A Costa Mesa 92627	(866)639-5775	
<b>Employment Assistance</b>			
Friendly Center	147 W. Rose Ave Orange 92867	(714)771-5300	
People In Need	151 Kalmus Dr Costa Mesa 92626	(714)751-1101	
G. G. Rehab Svc	12755 Brookhurst G. Grove 92840	(714)638-8277	
Goodwill Industries	410 N. Fairview St Santa Ana 92703	(714)480-3300	
Depart of Rehab	2002 E. McFadden Santa Ana92705	(714)662-6030	
Workforce Center	290 S. Anaheim Blvd Anaheim 92805	(714)765-4350	
One Stop Center	5405 Garden Grov Westminster 92683	(714)241-4900	
One Stop Center	125 Technology Dr Irvine 92618	(949)341-8000	
<b>Legal / Financial Assistance</b>			
Legal Aid Society	2101 N. Tustin Ave Santa Ana 92705	(800)834-5001	
United Fathers	1651 E. 4th St #122 Santa Ana 92701	(714)558-7949	
Cal-WORKs	1928 S. Grand Ave Santa Ana 92705	(714)435-5800	
Social Services	2020 W. Walnut St Santa Ana 92703	(714)834-8899	
Legal Aid Society	250 E. Center St. Anaheim 92806	(714)571-5200	
Regional Center	3320 E. La Palma Ave Anaheim 92806	(800)281-9799	
Cal-WORKs	6100 Chip Ave Cypress 90630	(714)503-2200	
Regional Center	115 Columbia Aliso Viejo 92656	(800)281-9799	

<b>PLACER COUNTY</b>			
<b>Emergency Housing</b>			
Salvation Army	286 Sutter St Auburn 95603	(530)889-3990	
The Gathering Inn	201 Berkeley Ave Roseville 95678	(916)791-9355	
Christ King Church	3125 N. Lake Blvd Tahoe City 96145	(530)583-1222	
<b>Transitional Housing</b>			
The Gathering Inn	201 Berkeley Ave Roseville 95678	(916)791-9355	
Keep it Simple Sister	937 Eckerman Rd Roseville 95661	(916)791-4361	W/C
CRR	11416 C Ave Auburn 95603	(530)885-1961	W/C
Harmony House	11523 C Ave Auburn 95603	(530)886-3470	SMI
Acres of Hope	17855 Lake Arthur Rd Applegate 95703	(530)878-8030	W/C
<b>Food / Clothing Resources</b>			
Adventist Church	12225 Rock Creek Rd Auburn 95602	(530)885-4232	

Salvation Army	286 Sutter St Auburn 95603	(530)889-3990	
Food Closet	2985 Richardson Dr Auburn 95603	(530)885-1921	
St. Vincent De Paul	503 Guiseppe Ct Roseville 95678	(916)781-3303	
Helping Hands	706 Atlantic St Roseville 95678	(916)783-1989	
Food Bank	8284 Industrial Rd Roseville 95678	(916)783-0481	
S. Reach Ministries	18015 Applegate Rd Applegate 95703	(530)878-2705	
Lutheran Church	3125 N. Lake Blvd Tahoe City 96145	(530)583-1222	
<b>Substance Abuse Treatment</b>			
VA Mather	10535 Hospital Way Mather 95655	(800)382-8387	V
County AOD Svc	11512 B. St. Auburn 95603	(530)889-7240	
CRR	11416 C Ave Auburn 95603	(530)885-1961	W/C
Hope, Help, Healing	11960 Heritage Oak Pl Auburn 95603	(530)885-4249	M
New Leaf Services	1254 High St Auburn 95602	(530)889-9195	
CORR	11417 D Ave Auburn 95603	(530)885-1917	
Keep it Simple Sister	937 Eckerman Rd Roseville 95661	(916)791-4361	W/C
Progress House Inc	34248 E. Towle Rd Alta 95701	(530)389-9208	
Indian AOD Services	11670 Atwood Rd Auburn 95603	(530)887-2828	
Sierra Services	2690 Lake Forest Rd Tahoe City 96145	(530)581-4054	
CORR	1530 3rd St #212 Lincoln 95648	(916)434-8927	
Koinonia Clinic	5980 Webb St Loomis 95650	(916)652-0171	
<b>Employment Assistance</b>			
Pride Industries	13080 Earhart Ave Auburn 95603	(530)888-0331	
One Stop Center	1919 Grass Valley Hwy Auburn 95603	(530)823-4631	
Depart of Rehab	11641 Blocker Dr #125 Auburn 95603	(530)823-4040	
One Stop Center	115 Ascot Dr Ste 180 Roseville 95661	(916)865-2440	
Depart of Rehab	151 N. Sunrise Ave Roseville 95661	(916)774-4400	
<b>Legal / Financial Assistance</b>			
Family Law Office	11546 B Ave Auburn 95603	(530)745-2000	
Salvation Army	286 Sutter St Auburn 95603	(530)889-3990	
Health/Human Svc	11519 B Ave Auburn 95603	(530)889-7610	
Legal Help Center	10820 Justice Ctr Dr Roseville 95678	(916)408-6446	
Health/Human Svc	100 Stonehouse Ct #A Roseville 95678	(916)784-6000	
Health/Human Svc	5225 N. Lake Blvd N. L. Tahoe 96140	(530)546-1900	
Public Assistance	1000 Sunset Blvd. #220 Rocklin 95765	(916)784-6000	

<b>PLUMAS COUNTY</b>			
<b>Housing / Food / Clothing Resources</b>			
Resource Center	591 W. Main St Quincy 95971	(530)283-0494	R
C. A.A.	P.O. Box 319 Quincy 95971	(530)283-2466	
Mountain Passages	355 Main St Quincy 95971	(530)283-0859	W
Resource Center	372 Main St Chester 96020	(530)258-4280	
CAN	120 Nevada St Portola 96122	(530)283-0262	R

<b>Substance Abuse Treatment</b>			
VA Diamond View	110 Bella Way Susanville 96130	(530)251-4550	V
Med/Mental Health	270 County Hospital Rd Quincy 95971	(530)283-6307	
Celebrate Recovery	2610 Hwy A-13 Lake Almanor 96130	(530)596-3683	OP
Rural Services	711 E. Main St Quincy 95971	(530) 283-2735	
<b>Employment / Financial Assistance</b>			
Work Connection	270 County Hospital Rd Quincy 95971	(530)283-1606	
One Stop Center	1953 E. Main St Quincy 95971	(530)283-9675	
Rural Services	586 Jackson St Quincy 95971	(530)283-3611	
Resource Center	372 Main St Chester 96020	(530)258-4280	
Salvation Army	41784 Hwy 70 Quincy 95971	(530)283-3632	
Social Services	270 County Hospital Rd Quincy 95971	(530)283-6350	

<b>RIVERSIDE COUNTY</b>			
<b>Emergency Housing</b>			
Access Center	2840 Hulen Pl Riverside 92504	(951)683-4101	
Life Family Shelter	2530 3 <sup>rd</sup> St Riverside 92507	(951)275-8755	F
Valley Shelter Inc	200 E. Menlo Ave Hemet 92543	(951)766-7476	
Hope Family Shelter	420 W. Harrison St Corona 92880	(951)279-1300	F
Refugee Foundation	22015 Cottonwood Moreno Valle 92553	(310)604-1054	
Rescue Mission	47470 Van Buren St Indio 92201	(760)347-3512	
Martha's Kitchen	83-791 Date Ave Indio 92201	(760)347-4741	
Norco Mission	420 W. Harrison St Corona 92880	(951)278-2215	P/C
<b>Transitional Housing</b>			
ABC Center	44-374 Palm St Indio 92201	(760)342-6616	
Martha's Village	83-791 Date Ave Indio 92201	(760)347-4741	
Coachella Mission	47470 Van Buren St Indio 92201	(760)347-3512	
House of Hope	13525 Cielo Azul D.H. Springs 92240	(760)329-4673	W
Mesa Vista	66610 12th St D. Hot Springs 92240	(760)251-5703	M
Riverside Manor	3873 Locust St Riverside 92501	(951)235-9897	Coed
Chance Sober Living	3339 Mulberry S Riverside 92501	(714)400-7448	M
Chance Sober Living	2880 Antares St Riverside 92503	(714)400-7448	M
Chestnut S. Living	3987 4th St Riverside 92501	(909)936-1239	M
Nelson Foundation	3685 15th St Riverside 92501	(951)683-4459	M
Peace of Mind	3976 4th St Riverside 92501	(909)731-8667	W
Mission House	2992 Mission Inn Ave Riverside 92507	(714)400-7448	W
Genesis House	3772 Taft St Riverside 92503	(951)689-7847	W/C
East Ranch S. Living	4439 Wade Ave Perris 92571	(951)219-8021	M
God's Helping Hand	1040 Teepee Lane Perris 92570	(951)657-3041	M
Light House Ministry	2324 San Jacinto Ave S. Jacinto 92583	(951)490-9930	M
United Outreach	18569 Grand Ave Lake Elsinore 92530	(951)678-5139	M
Hopeful Start	128 S. Broadway Blythe 92225	(760)835-1939	M
<b>Food / Clothing Resources</b>			

Amelias Light	23310 Meyer Dr Moreno Valley 92518	(951)656-6020	
Arlington Assistance	9000 Arlington Ave Riverside 92503	(951)689-5620	
Presbyterian Church	4495 Magnolia Ave Riverside 92501	(951)686-0761	
Salvation Army	3695 First St Riverside 92501	(951)784-4490	
Salvation Army	30400 Landau Cathedral City 92234	(760)324-2275	
Bridges of Hope	68-100 Ramon Cathedral City 92234	(760)328-0887	
Community Pantry	28890 Pujol St Temecula 92590	(951)676-8022	
Fellowship in Pass	650 Oak Valley Pkwy Beaumont 92223	(951)845-2693	
Harmony Kitchen	219 South Main St Blythe 92225	(760)921-4508	
FISH Food Bank	52525 Oasis Palm Coachella 92236	(760)398-1600	
Well in the Desert	555 N. Commercial Palm Spring 92262	(760)327-8577	
Salvation Army	40270 Los Alamos Rd Murrieta 92562	(951)677-1324	
<b>Substance Abuse Treatment</b>			
VA Blythe Clinic	1273 Hobson Way Blythe 92225	(760)-921-1224	V
Mental Health	4095 County Circle Dr Riverside 95203	(951)358-4500	
Casa Las Palmas	83-844 Hopi Ave Indio 92201	(760)347-9442	M
Victory Outreach	45-520 Clinton St Indio 92201	(760)625-1967	M
First Step House	40329 Stetson Ave Hemet 92544	(951)658-4466	
MFI Recovery Ctr.	2781 W. Ramsey St #1 Banning 92220	(951)849-3896	
ABC Recovery Ctr.	44-374 Palm St Indio 92201	(760)342-6616	
Rainbow Ranch	10943 Arlington Ave Riverside 92505	(951)354-0629	M/W
MFI Recovery Ctr.	5870 Arlington Ave Riverside 92504	(951)683-6596	
MFI Recovery Ctr.	4295 Brockton Ave Riverside 92501	(951)341-3786	W
Sunrise Ranch	6690 limonite frontage Riverside 92509	(866)540-5242	M
Hacienda Valdez	12890 Quinta Way D. Hot Spring 92240	(877)446-2959	W
The Ranch	7885 Annandale D. Hot Spring 92240	(760)329-2924	M
Hacienda Campus	1040 Tepee Lane Perris 92570	(951)657-3041	M
Salvation Army	24201 Orange Ave Perris 92570	(951)940-5790	M
<b>Employment Assistance</b>			
Complete Coach	1863 Service Ct Riverside 92507	(951)684-9585	
Depart of Rehab	3130 Chicago Ave Riverside 92507	(951)782-6650	
One Stop Center	1325 Spruce St Riverside 92507	(951)955-2200	
One Stop Center	1025 North State St Hemet 92543	(951)791-3500	
Workforce Center	44199 Monroe St Ste B Indio 92201	(760)863-2500	
Workforce Center	27941 Jefferson #A Temecula 92590	(951)699-8180	
Employ Training Ctr.	49-111 Hwy 111 # 5 Coachella 92236	(760)398-8889	
<b>Legal / Financial Assistance</b>			
Inland Legal Svc	82632C US Hwy 111 Indio 92201	(760)342-1591	
Inland Legal Svc	1040 Iowa Ave # #109 Riverside 92507	(951)368-2555	
Social Services	11060 Magnolia Ave Riverside 92505	(951) 358-3400	
Social Security	1287 W. Hobson Way Blythe 92225	(800)772-1213	
Resource Center	5473 Mission Blvd Riverside 92509	(951)328-1575	
Salvation Army	3695 First St Riverside 92501	(951)784-4490	
Resource Center	14201 Palm Dr Des. Hot Springs 92240	(760)288-3313	F
Resource Center	371 Wilkerson Ave Perris 92571	(951)443-1158	F



<b>SACRAMENTO COUNTY</b>			
<b>Emergency Housing</b>			
VOA Shelter	1400 A St Sacramento 95814	(916)448-5507	M
Sharing Place	5105 F St. Sacramento 95819	(916)452-4663	
Family Promise	P.O. Box 1378 Sacramento 95812	(916)443-3107	
Gospel Mission	400 N. Bannon St Sacramento 95814	(916)447-3268	M
Salvation Army	200 North B St Sacramento 95814	(916)442-0331	M/F
Carols Place	Sacramento 95814	(916)441-0123	
Turning Point	601 N. Market #350 Sacramento 95835	(916)283-8280	
E. H. C.	4516 Parker Ave Sacramento 95820	(916)455-0415	W/C
St. John's Shelter	4410 Power Inn Rd Sacramento 95826	(916)453-1482	W/C
<b>Transitional Housing</b>			
Transitional Living	719 J. St Sacramento 95814	(916)444-3118	M/W
Cottage Housing	1500 North A St Sacramento 95814	(916)492-9009	
VOA	3587 Bleckley St Mather 95655	(916)228-3100	
Get Back Inc	6901 26th St Rio Linda 95673	(916)271-0354	
House of Hope	4001 49th Ave Sacramento 95823	(916)613-2730	
Quinn Cottages	1500 N. A St Sacramento 95811	(916)492-9065	M/W
River City Recovery	500 22nd St Sacramento 95816	(916)442-3979	M/W
Clean/Sober Living	8938 Madison Ave Fair Oaks 95828	(916)961-2691	M/W
SVRC	7270 E. Southgate Sacramento 95823	(916)393-8387	V
Oak House	7919 Oak Ave Citrus Heights 95610	(916)721-9699	M
Sac-recovery house	1914 22nd St Sacramento 95816	(916)455-6258	M
7th Avenue House	3859 7th Ave Sacramento 95817	(916)904-4234	M
Nor-Cal C & S Living	P.O. Box 4082 Citrus Heights 95611	(916)676-2825	M
Northside Living	785 Plaza Ave Sacramento 95815	(916)920-9331	M
Gateway Foundation	4049 Miller Way Sacramento 95817	(916)451-9312	W
<b>Food / Clothing Resources</b>			
Methodist Church	4151 Don Julio N. Highlands 95660	(916)332-7749	
New Hope Church	1821 Meadowview Sacramento 95832	(916)422-3370	
Clothes Closet	4990 Stockton Blvd Sacramento 95820	(916)875-3330	
St. Paul Church	3996 14 <sup>th</sup> Ave Sacramento 95820	(916)737-7070	
N. T. Baptist Church	6746 34 <sup>th</sup> St N. Highlands 95660	(916)344-0440	
Daughters of Zion	6489 47 <sup>th</sup> St Sacramento 95823	(916)422-3875	
Antioch Church	7650 Amherst St Sacramento 95832	(916)665-2600	
Adventist Services	6701 Lemon Hill Sacramento 95824	(916)381-5353	
Genesis Church	2801 Meadowview Sacramento 95832	(916)422-8772	
St Vincent De Paul	7580 Center Pkwy Sacramento 95823	(916)733-2010	
First Baptist Church	2601 Del Paso Blvd Sacramento 95815	(916)922-9365	
7 <sup>th</sup> Day Adventist	5810 Pecan Ave Orangevale 95662	(916)967-2838	
T. Lakes Food Bank	327 Montrose Dr Folsom 95630	(916)985-6232	
Glory Bound Ministry	4527 Parker St Sacramento 95820	(916)452-7078	
Loaves and Fishes	1321 North C St Sacramento 95811	(916)446-0874	
St. Vincent de Paul	2428 Bell Street Sacramento 95825	(916)481-7113	

<b>Substance Abuse Treatment</b>			
VA Nor-Cal HCS	10535 Hospital Way Mather 95655	(800)382-8387	V
Health Services	7001A E. Pkwy #1000 Sac 95823	(916)875-6091	
AOD Programs	1700 K St 1 <sup>st</sup> Fl Sacramento 95811	(800)879-2772	
Sac Dental Clinic	4600 Broadway #2100 Sac 95820	(916)874-8300	
Guest House	1400 N. A St Bldg A Sacramento 95814	(916)440-1500	M/W
Salvation Army	1615 D St Sacramento 95814	(916)441-5267	M
Westcare	1820 Tribute Rd #E Sacramento 95815	(916)564-4400	M/W
WellSpace Health	8233 E. Stockton Sacramento 95828	(916)737-5555	
Cornerstone Home	6348 Appian Way Carmichael 95608	(916)966-5102	W
Overcomer Program	669 Plaza Ave Sacramento 95815	(916)924-3113	W
Gateway Foundation	4049 Miller Way Sacramento 95817	(916)451-9312	W
Promise House	2727 P St Sacramento 95816	(916)452-3073	W/C
Union Gospel AOD	400 Bannon St Sacramento 95811	(916)447-3268	M
Oak House	7919 Oak Ave Citrus Heights 95610	(916) 721-9699	M
Overcomers Ministry	2733 Branch St Sacramento 95815	(916)920-3082	M
Sac recovery house	1914 22nd St Sacramento 95816	(916)455-6258	M
Restoration House	4141 Soledad Ave Sacramento 95820	(916)454-2068	M
Second to None	7947 Lichen Dr Citrus Heights 95621	(916)271-3803	M
Center Point	11228 Fair Oaks Blvd Fair Oaks 95828	(916)962-2800	M/W
River City Recovery	500 22nd St Sacramento 95816	(916)442-3979	M/W
SVRC	7270 E. Southgate Sacramento 95823	(916)393-8387	V
AOD Prevention	3321 Power Inn Rd Sacramento 95826	(916)874-9754	
C & S Program	1301 North C St Sacramento 95811	(916)498-0331	M/W
Sobriety Change	4825 J St #120 Sacramento 95814	(916)454-4242	M/W
Bridges T. Services	3600 Power Inn Rd #C Sac 95816	(916)450-0700	W
New Directions	7996 O. Winding Way Fair Oaks 95628	(916)966-4523	
Calvary Center	2665 Del Paso Blvd Sacramento 95815	(916)929-5725	
<b>Employment Assistance</b>			
Career Center	7011 Sylvan Rd Citrus Heights 95610	(916)676-2540	
One Stop Center	3725 Marysville Blvd Sac 95838	(916)286-8600	
Employment Center	8376 Fruitridge Rd Sacramento 95828	(916)393-7401	
MAAP Inc.	4241 Florin Rd #65 Sacramento 95823	(916)394-2323	
EDD Veteran Svc	2901 50th St Sacramento 95817	(916)227-0314	
La Familiar Center	5523 34 <sup>th</sup> St Sacramento 95820	(916)452-3601	
Sac Urban League	3725 Marysville Blvd Sac 95838	(916)286-8600	
Breaking Barriers	4210 M.L.K. Blvd Sacramento 95820	(916)583-1215	
Community Coalition	444 N. 3rd St Sacramento 95811	(916)228-3376	
<b>Legal / Financial Assistance</b>			
Nor-Cal Legal Svc	515 12th St Sacramento 95814	(916)551-2150	
Vol. Legal Services	517 12th St Sacramento 95814	(916)551-2102	
All Of Us Or None	P.O. Box 292967 Sacramento 95829	(916)501-9988	
Francis House	1422 C St Sacramento 95814	(916)443-2646	
Human Services	1725 28th St Sacramento 95816	(916)874-2072	

<b>SAN BENITO COUNTY</b>			
<b>Housing / Food / Clothing Resources</b>			
Com. Solutions	310 4th St Ste105 Hollister 95023	(831)637-1094	DV
Housing Authority	365 4th St Hollister 95023	(831)637-0487	
Goodwill Industries	550 Tres Pinos Rd Hollister 95023	(831)634-0960	
Food Bank	1133 San Felipe Dr Hollister 95023	(831)637-0340	
<b>Substance Abuse Treatment</b>			
VA Monterey Clinic	3401 Engineer Lane Seaside 93955	(831)883-3800	V
Health Services	1131 San Felipe Rd Hollister 95023	(831)636-4020	
Health Foundation	351 Felice Dr Hollister 95023	(831)637-5306	
<b>Employment / Financial Assistance</b>			
EDD	1111 S. Felipe Rd #107 Hollister 95023	(831)637-5627	
Human Services	1111 San Felipe Rd Hollister 95023	(831)637-9293	
Rent Assistance	1111 S. Felipe Rd #108 Hollister 95023	(831)637-9293	

<b>SAN BERNADINO COUNTY</b>			
<b>Emergency Housing</b>			
Desert Manna	209 N. First Ave Barstow 92311	(760)256-7797	M/W
Frazee Center	1140 W. Mill San Bernardino 92410	(909)889-4424	M/W/C
Unity Shelter	61607 29 Palms Joshua Tree 92252	(760)366-9663	DV
Inland Homes	PO Box 239 Loma Linda 92354	(909)796-6381	F
Hope Partners	1753 N. Park Ave Pomona 91768	(909)629-3743	F
Foothill Shelter	1501 W. Ninth St Upland 91786	(909)920-5568	F
Downtown Mission	375 W. 7th St San Bernardino 92401	(909)884-1385	
Vera's Open Arms	14050 Cherry Ave Fontana 92337	(909)544-3027	
Veronica's Home	1495 W Victoria S. Bernardino 92411	(909)888-9064	W/C
High Desert Service	14049 Amargosa Victorville 92392	(760)245-5991	M/W/C
Catholic Charities	703 E. Main St Barstow 92311	(760)256-3733	M/W
Catholic Charities	1800 Western S. Bernardino 92411	(909)880-3625	M/W
S.O.A.R	5055 Canyon Crest Riverside 92507	(951)750-7627	M/W
The Salvation Army	746 W. 5th St San Bernardino 92410	(909)888-1336	M/W
<b>Transitional Housing</b>			
New Hope Village	203 W. Fredricks #3 Barstow 92311	(760)256-3656	M/W/C
New Start Living	1172 N. D St San Bernardino 92411	(626)786-7973	M/W
Lazy Dog Ranch	12829 14th St Yucaipa 92399	(909)795-0595	M
Let's Be Clean	1356 N. Arrowhead S. Bern 92410	(909)889-4597	M/W
The White House	9238 19th Ran. Cucamonga 91701	(909)455-7248	M/W
The Palace	13765 Starshine Dr Victorville 92392	(951)318-5415	M/W
Set Free Ministries	PO Box 291265 Phelan 92329	(760)881-0828	W
Time For Change	1255 E. Highland S. Bern 92404	(909)886-2994	
Gibson House	1100 N. D St San Bernardino 92410	(909)884-0840	M
Hope Homes	18985 Cajon Blvd S. Bern 92407	(909)864-0644	M
Victory Life	13369 5 <sup>th</sup> St Chino 91710	(626)917-7555	M
Men's Sober Retreat	9730 Magnolia Bloomington 92316	(909)380-9542	M
Set Free Ministries	3842 Coyote Rd Phelan 92371	(760)961-1431	M/W

Fontana Ranch	17776 Citron Ave Fontana 92335	(951)514-1056	M
Victory Outreach	1000 W. Fourth St Ontario 91762	(909)917-1062	M
Open Doors Ministry	2646 W. Baseline Rd Rialto 92376	(909)938-9856	
New Hope Home	16775 Olive St Hesperia 92345	(760)244-2805	M
Winners Circle	3246 N. "E" St San Bern 92405	(951)538-3247	
Life Development	15815 Horizon Way Adelanto 92301	(760)246-0691	W
House of Hope	10034 Cedar Bloomington 92316	(909)875-2476	M
Water of Life Church	8440 Nuevo Ave Fontana 92335	(909)803-1059	M/W
US Vets Riverside	15105 6th St March AFB 92518	(951)656-6892	V
Scott Housing	6713 Indiana #03 Riverside 92506	(951)378-1600	M/W
House of Angels	3664 N. E. St San Bernardino 92405	(909)841-4715	
Rescue Mission	16611 Tracy St #C Victorville 92395	(760)955-5958	
<b>Food / Clothing Resources</b>			
Salvation Army	14585 La Paz Dr Victorville 92395	(760)245-2545	
Helping Hand	15527 8th St Victorville 92395	(760)243-5933	
The Lords Table	15512 Sixth St Victorville 92392	(760)241-2043	
Salvation Army	56659 29 Palms Yucca Valley 92284	(760)228-0114	
Cathedral of Praise	1521 S. Riverside Dr Rialto 92376	(909)874-8676	
Loveland Jubilee	1436 Ayala Dr Ste G Rialto 92376	(909)873-2710	
Salvation Army	746 W. 5th St San Bernardino 92410	(909)888-1336	
Frazee Center	1140 W. Mill San Bernardino 92410	(909)889-4424	
Mary's Mercy Center	641 Roberds San Bernardino 92411	(909)889-2558	
Christian Alliance	340 E. Evans San Bernardino 92404	(909)885-0012	
Way World Outreach	3701 N. Sierra S. Bernardino 92405	(909)884-7117	
Cornerstone Church	903 E. Third St S. Bernardino 92410	(909)888-1729	
Mercy House	905 E. Holt Blvd Ontario 91764	(909)391-2630	
Food Warehouse	16815 Spring St Fontana 92335	(909)803-1059	
Church of Christ	331 W. Ninth St Upland 91786	(909)982-1676	
Methodist Church	1543 Barbara St Wrightwood 92397	(760)249-3084	
Rim of the World	31116 Hilltop Running Springs 92382	(909)867-2911	
Bread of Life	9014 Benson Ave Montclair 91786	(909)627-1634	
Set Free Ministries	13700 Calimesa Blvd Yucaipa 92399	(909)446-0033	
Caring for the Hills	15554 Cecelia St Chino Hills 91709	(909)597-1454	
Serra Parrish	8820 Sheep Creek Rd Phelan 92329	(760)868-4342	
Hutton Center	660 Colton Ave Colton 92324	(909)370-6168	
St. Ann Parrish	218 D St Needles 92363	(760)326-2721	
St. Joseph's Church	505 E. Mtn. View St Barstow 92311	(760)256-6818	
Caring for the Hills	15558 Avery St Chino Hills 91709	(909)597-1454	
The Way Station	61722 Commercial Josh Tree 92252	(760)366-8088	
Angels Who Care	675 S. White Ave Pomona 91767	(909)214-7699	
ACI Ministries	9791 Arrow R. Cucamonga 91730	(909)609-1475	
His Hands Ministry	877 N. Campus Upland 91786	(909)981-8110	
<b>Substance Abuse Treatment</b>			
VA Loma Linda HCS	11201 Benton St Loma Linda 92357	(909)825-7084	V

Behavioral Health	268 W. Hospitality S. Bern 92415	(909)382-3133	
Public Health	799 E. Rialto S. Bernardino 92410	(800)782-4264	
Cedar House	18612 Santa Ana Bloomington 92316	(909)421-7120	M/W
Pine Ridge Center	2727 Highland Run. Springs 92382	(909)867-7028	M
St. John of God	13333 Palmdale Rd Victorville 92392	(760)241-4917	M/W
Barstow Recovery	308 E. Fredericks S Barstow 92311	(760)256-7313	M/W
Panorama Ranch	308 E. Fredrick St Barstow 92311.	(760)256-7313	
Drug Alt. Program	11810 Kingston Grand Ter. 92313	(909)783-1094	M
Set Free Ministries	473 W. Baseline S. Bern 92410	(909)383-2323	M/W
Maple House	10888 Maple Bloomington 92316	(909)421-7120	W/C
Gibson House	1135 N. D St San Bernardino 92410	(909)888-6956	W
S. A. Rehab Center	363 S. Doolittle S. Bernardino 92408	(909)889-9605	M
New Wine Retreat	10970 Kendall Lucerne Valley 92356	(760)248-7315	M
Castle Ranch	18654 Cajon Blvd Devore 92407	(951)378-4245	M
Victory Outreach	73 Lords Rd Helendale 92342	(760)245-0042	M
<b>Employment Assistance</b>			
Depart of Rehab	3595 Inland Empire Ontario 91764	(909)948-6050	
Workforce Develop	658 E. Briar Dr S. Bernardino 92408	(909)382-0440	
EDD	15419 Cholame Rd Victorville 92392	(760)241-1682	
Goodwill Career Ctr.	223 W. Colton Ave Redlands 92374	(909)335-2006	
<b>Legal / Financial Assistance</b>			
Inland Legal Svc	10601 Civic R. Cucamon.ga 91730	(909)980-0982	
Inland Legal Svc	715 N. Arrowhead Bernardino 92401	(909)884-8615	
Transitional Assist	10875 Rancho Rd Adelanto 92301	(877)410-8829	
Social Security	720 E. Main St Barstow 92311	(800)772-1213	
Salvation Army	56659 29 Palms Yucca Valley 92284	(760)228-0114	

<b>SAN DIEGO COUNTY</b>			
<b>Emergency Housing</b>			
La Pasada Shelter	2478 Impala Dr Carlsbad 90101	(760)929-2322	M
St. Vincent De Paul	1501 Imperial Ave San Diego 92101	(619)233-8500	
SD Rescue Mission	120 Elm St San Diego 92101	(619)687-3720	
S. B. Services	430 F St Chula Vista 91910	(619)426-2350	
Rachel's Center	759 8 <sup>th</sup> Ave San Diego 92101	(619)696-0873	W
Rachel's Shelter	759 8th Ave San Diego 92101	(619)236-9074	W
<b>Transitional Housing</b>			
Brother Bennos	3260 Production Ave Oceanside 92058	(760)439-1244	W
Door of Hope	2799 Health Ctr. Dr San Diego 92123	(858)279-1100	W/C
National Crossroads	4991 Imperial Ave San Diego 92113	(619)262-0868	W
R & R Sober Living	981 Civic Ctr. Dr Vista 92083	(760)758-8880	M/W
Salvation Army	1335 Broadway San Diego 92101	(619)239-4037	M/F
Next Step IX	5118 San Aquario Dr Pac. Beach 92109	(619)379-8627	Coed
Eleanors Place	6760 University Ave San Diego 92115	(619)546-7137	W
Casa Pacifica	PO Box 64 Solana Beach 92075	(858)864-7347	W

Next Step II	5272-78 Wightman St San Diego 92105	(619)634-3265	
Next Step I	4231 41st St San Diego 92105	(619)634-4448	M
Next Step III	4477 1/2 50th St San Diego 92115	(619)288-0805	M
Next Step IV	4282-86 49th St San Diego 92115	(619)674-8587	M
Next Step V	7704-06 Alton Dr San Diego 91945	(619)634-5502	M
Next Step VII	1829 K Ave National City 91950	(619)931-9867	M
Next Step VIII	4914 Pacifica Dr San Diego 92109	(619)379-8627	M
Next Step X	1721 Melrose #10 Chula Vista 91911	(619)870-6123	M
<b>Food / Clothing Resources</b>			
Interfaith Services	2195 Oceanside Blvd Oceanside 92054	(760)721-2117	
Brother Bennos	3260 Production Ave Oceanside 92058	(760)439-1244	
Helping Hands	309 Prescott Ave El Cajon 92020	(619)937-0197	
Helping Hands	334 14 <sup>th</sup> St Del Mar 92104	(858)755-1616	
Project Hand	580 Hilltop Ave Chula Vista 91910	(619)425-4061	
Methodist Church	455 Palm Ave Imperial Beach 91932	(619)424-5181	
First Presbyterian	320 Date St San Diego 92101	(619)232-7513	
Urban Ministries	2459 Market St San Diego 92102	(619)232-2753	
Food Bank	9850 Distribution Ave San Diego 92121	(866)350-3663	
Catholic Charities	917 E. Vista Way Vista 92083	(760)631-4792	
<b>Substance Abuse Treatment</b>			
VA San Diego HCS	3350 La Jolla Village Dr S. Diego 92161	(858)552-8585	V
Dept of Health	3851 Rosecrans St San Diego 92110	(619)542-4039	
Behavioral Health	3255 Camino Del Rio S. Diego 92108	(619)563-2700	
Veterans Village	4141 Pacific Hwy San Diego 92110	(619)497-0142	
Green Oaks Ranch	1237 Green Oaks Rd Vista 92081	(760)727-0251	M/W
Escondido Services	401 N. Spruce St Escondido 92025	(760)747-1553	
Fellowship Center	737 E. Grand Ave Escondido 92025	(760)745-8478	M
VOA	101 16 <sup>th</sup> St San Diego 92101	(619)232-9343	M/F
Casa Raphael	993 Postal Way Vista 92083	(760)630-9922	M
Amity Vista Ranch	2260 Watson Way Vista 92083	(760)599-1892	M
Victory Outreach	181 Pala Vista Dr Apt 1 Vista 92083	(760)643-9186	M
Metamorphosis	722 33rd San Diego 92102	(619)236-9217	M/W
New Connections	2049 Skyline Dr Lemon Grove 91945	(619)465-7303	
Providence Place	4890 67th S San Diego 92115	(619)667-3922	W/C
New Entra Casa	3575 Pershing Ave San Diego 92104	(619)294-4526	W
Casa de Milagros	1127 South 38th St San Diego 92113	(619)262-4002	W
VOA	120 Elm St #200 San Diego 92101	(619)819-1738	M
VOA	650 11th Ave San Diego 9210	(619)234-6218	M
Tender Mercy	1907 Apple S #8 Oceanside 92054	(760)757-7833	M/W
The Training Center	525 Grand Ave Spring Valley 91977	(619)327-5400	M
New Life Outreach	3735 Sunset Lane San Ysidro 92173	(619)428-9582	M
Home Stretch	4989 El Cajon Blvd San Diego 92115	(619)287-2588	M
Freedom Ranch	1777 Buckman Springs Campo 91906	(619)478-5696	M
Heartland House	5855 Streamview Dr San Diego 92105	(619)287-5460	M
The Lighthouse	542 14th St San Diego 92101	(619)515-0243	M
<b>Employment Assistance</b>			

Coming Home	3295 Meade Ave San Diego 92116	(619)501-5908	
Coming Home	336 Euclid Ave #503 San Diego 92114	(619)527-6161	
Second Chance	6145 Imperial Ave San Diego 92114	(619)234-8888	
Goodwill Industries	1056 E. Vista Way Vista 92084	(760)630-6700	
N. C Career Center	463 North Midway Dr Escondido 92027	(760)871-1962	
Coastal Career Ctr.	1949 Avenue Del Oro Oceanside 92056	(760)631-6150	
EDD	924 E. Main St El Cajon 92021	(619)590-3900	
Cal-Works	1750 5th Ave San Diego 92101	(619)321-1800	
Depart of Rehab	7575 Metropolitan Dr San Diego 92108	(619)767-2100	
VVSD Job Club	4141 Pacific Hwy San Diego 92110	(619)393-2080	
<b>Legal / Financial Assistance</b>			
Vol. Lawyer Program	707 Broadway#1400 San Diego 92101	(619)235-5656	
Legal Aid Society	110 S. Euclid Ave San Diego 92114	(877)534-2524	
St. Vincent De Paul	1501 Imperial Ave San Diego 92101	(619)233-8500	
Center for Solutions	4508 Mission Bay Dr San Diego 92109	(858) 272-1574	
Catholic Charities	349 Cedar St San Diego 92101	(619)231-2828	
Project Hand	580 Hilltop Dr Chula Vista 91910	(619)425-4061	
Nell Good Day Ctr.	299 17 <sup>th</sup> St San Diego 62101	(619)234-3041	
Human Services	1130 10th Ave San Diego 92101	(866)262-9881	
Social Security	1333 Front St San Diego 92101	(800)772-1213	

<b>SAN FRANCISCO COUNTY</b>			
<b>Emergency Housing</b>			
Mission Center	165 Capp St San Francisco 94110	(415)869-7977	
Swords Plowshares	1060 Howard St San Francisco 94103	(415)252-4788	V
Episcopal Services	1001 Polk St San Francisco 94109	(415)487-3300	M/W
Multi-Service Center	525 5th St San Francisco 94107	(415)597-7960	
A Woman's Place	1049 Howard St San Francisco 94103	(415)487-2140	DV
Glide Walk-In Ctr.	330 Ellis St San Francisco 94102	(415)674-6000	
Hamilton Housing	1631 Hayes St San Francisco 94117	(415)409-2100	F
<b>Transitional Housing</b>			
Clara House	111 Page St San Francisco 94102	(415)863-0681	F
Harbor House	407 9 <sup>th</sup> St San Francisco 94103	(415)503-3029	M/W/C
Hamilton Housing	1631 Hayes St San Francisco 94117	(415)409-2100	F
Henry Ohlhoff	601 Steiner St San Francisco 94117	(415)621-4388	
Walden House	1735 Mission St San Francisco 94103	(415)361-5098	M/W
Walden House	1445 Chinook Ct San Francisco 94130	(415)361-5098	M/W
Victory Outreach	1266 Fitzgerald San Francisco 94124	(415)333-2111	M/W
ARA First Step	1035 Haight St San Francisco 94117	(415)863-3661	M/F
P. Coast Recovery	2190 46 <sup>th</sup> Ave San Francisco 94116	(415)559-3922	
Cameo House	424 Guerrero St San Francisco 94110	(415)703-0600	W/C
Grace Center	1310 Bacon St San Francisco 94134	(415)337-1938	W
Nannys Recovery	1686 Oakdale San Francisco 94124	(415)286-2998	W
A Woman's Place	1049 Howard St San Francisco 94103	(415)487-2140	DV

<b>Food / Clothing Resources</b>			
Methodist Church	1400 Judah San Francisco 94122	(415)566-3704	
Third Baptist Church	1399 McAllister San Francisco 94115	(415)346-4426	
United Church	1975 Post St San Francisco 94101	(415)921-7653	
House of Hospitality	225 Potrero St San Francisco 94103	(415)552-0240	
Hospitality House	290 Turk St San Francisco 94102	(415)749-2143	
Mission of Charity	3215 C. Chavez S. Francisco 94110	(415)586-3449	
Rescue Mission	140 Turk St San Francisco 94102	(415)441-1628	
Glide Daily Meals	330 Ellis St San Francisco 94102	(415)674-6043	
St. Anthony Dining	150 Golden Gate S. Francisco 94102	(415)241-2690	
St. Anthony Clothing	1185 Mission St San Francisco 94103	(415)241-2600	
City Team Ministries	164 Sixth St San Francisco 94103	(415)861-8688	
<b>Substance Abuse Treatment</b>			
VA SFMC	4150 Clement St San Francisco 94121	(415)221-4810	V
Behavior Health Ctr.	1380 Howard St San Francisco 94103	(415)503-4730	
Com. Program	70 Oak Grove St San Francisco 94107	(415)575-6463	
Delancey Street	600 Embarcadero S. Francisco 94107	(415)512-5104	
St Anthony's	150 Golden Gate S. Francisco 94102	(415)592-2855	
Friendship House	56 Julian Ave San Francisco 94103	(415)865-0964	
Harbor Light Center	42 McLea Ct San Francisco 94103	(415)503-3072	
S. A. Rehab Center	1500 Valencia St San Francisco 94110	(415)643-8000	
Walden House	815 Buena Vista West S. Fran, 94117	(415)554-1450	
Senior Ex-Offender	1706 Yosemite San Francisco 94124	(415)822-1444	
Harbor House	407 9th St San Francisco 94103	(415)503-3029	V
Epiphany Center	100 Masonic Ave San Francisco 94118	(415)567-8370	W
Walden House	214 Haight St San Francisco 94102	(415)554-1480	W
The Stepping Stone	255 10th Ave San Francisco 94118	(415)751-5921	W
City Team Ministries	164 Sixth St San Francisco 94103	(415)861-8688	M
Casa Quetzal	635 Brunswick St San Francisco 94112	(415)337-4065	M
Freedom Inc	1353 48th Ave San Francisco 94122	(415)665-8077	M
Walden House	890 Hayes St San Francisco 94117	(415)701-5100	M
Met. Fresh Start	316 Leland Ave San Francisco 94134	(415)585-8808	M
<b>Employment Assistance</b>			
Depart of Rehab	301 Howard #700 S. Francisco 94105	(415)904-7100	
Ex-Offender Svc	1500 Mission St San Francisco 94102	(415)575-2113	
One Stop Center	1449 Webster St San Francisco 94103	(415)655-2620	
One Stop Center	1800 Oakdale San Francisco 94124	(415)970-7762	
One Stop Center	3120 Mission St San Francisco 94110	(415)401-4800	
One Stop Center	73 Leland Ave San Francisco 94134	(415)239-8705	
One Stop Center	801 Turk St San Francisco 94102	(415)749-7503	
<b>Legal / Financial Assistance</b>			
Rural Legal Assist	631 Howard #300 S. Francisco 94105	(415)777-2752	
Vol. Legal Services	301 Battery 3/Fr S. Francisco 94111	(415)989-1616	
Bay Area Legal Aid	1035 Market 6/Fr S. Francisco 94103	(415)354-6360	
Clean Slate	555 7th St San Francisco 94103	(415)553-9337	



Swords Plowshares	1060 Howard St San Francisco 94103	(415)252-4788	
Medi-Cal Connect	1440 Harrison St San Francisco 94120	(415)863-9892	
Human Services	170 Otis St San Francisco 94103	(415)557-5000	

SAN JOAQUIN COUNTY			
Emergency Housing			
Family Shelter	520 S. Union Rd Manteca 95337	(209)824-0658	
S. A. Hope Harbor	622 N. Sacramento St .Lodi 95240	(209)367-9560	M
Salvation Army	622 N. Sacramento Lodi 95240	(209)334-6346	
Lodi House	801 S. Washington St Lodi 95240	(209)334-6346	W/C
Valle Del Sol	4701 Farmington Rd Stockton 95215	(209)944-5699	
Stockton Motor Inn	1333 MLK Jr. Blvd Stockton 95205	(209)464-9881	
Stockton Shelter	411 S. Harrison St Stockton 95203	(209)465-3612	M/W
Stockton Shelter	611 W. Church St Stockton 95203	(209)466-2605	
Rescue Mission	445 S. San Joaquin St Stockton 95203	(209)466-2138	M/W
New Hope Shelter	445 S. San Joaquin St Stockton 95203	(209)466-2138	W/C
Haven of Peace	7070 Harlan Rd French Camp 95231	(209)982-0396	W
Transitional Housing			
Salvation Army Lodi	622 N. Sacramento Lodi 95240	(209)334-6346	
Stockton Shelter	411 S. Harrison St. Stockton 95203	(209)465-3612	
House of Hope	1050 Sullivan St Stockton 95205	(209)598-1255	w
Theresa's S. Living	2633 O'Dell Ave Stockton 95206	(209)649-6120	Coed
Theresa's S. Living	3903 O'Dell Ave Stockton 95206	(209)649-6120	M
Theresa's S. Living	7136 Tristan Circle Stockton 95210	(209)649-6120	W
Interventions Inc	1003 W. Matthew French Camp 95231	(209)234-1087	M/W
Food / Clothing Resources			
St. Mary's Dining	545 W. Sonora St Stockton 95203	(209)467-0703	
Food Bank	7 W. Scotts Ave Stockton 95203	(209)464-7369	
Gospel Center	445 S. San Joaquin St Stockton 95203	(209)466-2138	
Good Samaritan	1331 E. Fremont St Stockton 95205	(209)469-7098	
Interfaith Ministries	311 W. Grant Line Rd Tracy 95376	(209)836-5424	
Salvation Army	622 N. Sacramento Lodi 95240	(209)367-9560	
Com. Service Center	415 S. Sacramento St Lodi 95240	(209)331-7516	
Salvation Army	525 W. Lockeford St Lodi 95240	(209)369-5896	
St. Vincent de Paul	16200 Cambridge Dr Lathrop 95330	(209)858-4466	
Substance Abuse Treatment			
VA Stockton Clinic	7777 S. Freedom French Camp 95231	(209)946-3400	v
Mental Health	1212 N. California St Stockton 95202	(209)468-8700	
Health Services	1601 E. Hazelton Ave Stockton 95205	(209)468-3830	
AOD Services	620 N. Aurora St #6 Stockton 95202	(209)468-9600	
New Directions	1981 Cherokee Rd Stockton 95205	(209)870-6500	M/W
S. A. Rehab-Center	1247 S. Wilson Way Stockton 95205	(209)466-3871	M
Recovery House	500 W. Hospital French Camp 95231	(209)468-6857	M/W
Last Chance Inc	5555 S. El Dorado French Camp 95231	(209)688-4578	M

Interventions Inc	1003 W. Matthews French Camp 95231	(209)234-1087	M/F
Native Direction, Inc	13505 S. Union Rd Manteca 95336	(209)858-2421	M
<b>Employment Assistance</b>			
Depart of Rehab	1507 E. March Lane Stockton 95210	(209)473-5900	
Work-Net Center	56 S. Lincoln St Stockton 95203	(209)468-3500	
Goodwill Center	129 S. Grant St Stockton 95202	(209)466-2311	
Work-Net Center	631 E. Oak St Lodi 95240	(209)331-2081	
Work-Net Center	302 Northgate Dr Manteca 95336	(209)825-1300	
Work-Net Center	543 W. Grant Line Rd Tracy 95376	(209)831-5002	
<b>Legal / Financial Assistance</b>			
Cal Rural Legal Ass	145 E. Weber Ave Stockton 95202	(209)946-0605	
Family Law Help	540 E. Main St Stockton 95202	(209)468-8280	
Human Services	333 E. Washington St Stockton 95202	(209)468-1000	
Social Security	4747 Feather River Dr Stockton 95219	(877)803-6314	

<b>SAN LUIS OBISPO COUNTY</b>			
<b>Housing / Food / Clothing Resources</b>			
Memorial Shelter	750 Orcutt Rd San Luis Obispo 93401	(805)781-3993	
ECHO	6370 Atascadero Ave Atascadero 93422	(805)462-3663	
Captive Hearts	882 W. Grand Ave Grover Beach 93433	(805)481-4500	DV
Casa Solana I	383 S.13th St Grover Beach 93433	(805)481-8555	W
Salvation Army	815 Islay St San Luis Obispo 93401	(805)544-2401	
Prado Day Center	43 Prado Rd San Luis Obispo 93401	(805)786-0617	
Loaves & Fishes	5411 El Camino Real Atascadero 93422	(805)461-1504	
Loaves & Fishes	2650 Spring St Paso Robles 93446	(805)238-4742	
St. Patrick's	501 Fair Oaks Arroyo Grande 93420	(805)489-2680	
<b>Substance Abuse Treatment</b>			
VA SLO Clinic	1288 Morro #200 S. Luis Obispo 93401	(805)543-1233	V
Captive Hearts	882 W. Grand Ave Grover Beach 93433	(805)481-4500	DV
Mental Health Svc	2178 Johnson S. Luis Obispo 93401	(805)781-4700	
Public Health Svc	2191 Johnson S. Luis Obispo 93401	(805)781-5500	
<b>Employment / Financial Assistance</b>			
One-Stop Center	1800 E. Grand #H Grover Beach 93433	(805)270-3100	
One-Stop Center	880 Industrial Way S. Luis Obispo 93401	(805)903-1400	
Depart Of Rehab	3220 S. Higuera #102 S.L.O 93401	(805)549-3361	
Catholic Charities	3592 Broad St#104 S.L. Obispo 93401	(805) 541-9110	
Prado Day Center	43 Prado Rd San Luis Obispo 93401	(805)786-0617	
Social Services	1086 E. Grand Arroyo Grande 93420	(805)474-2000	

<b>SAN MATEO COUNTY</b>			
<b>Emergency Housing</b>			
Maple Street Shelter	1580A Maple St Redwood City 94063	(650)364-1150	V
Spring Street Shelter	2686 Spring St Redwood City 94063	(650)365-5772	MH

Fair Oaks Center	2600 Middlefield Redwood City 94063	(650)780-7500	R
Samaritan House	4031 Pacific Blvd San Mateo 94403	(650)347-3648	R
D. C. Service Center	350 90th St Daly City 94105	(650)991-8007	R
Pacifica Center	1809 Palmetto Ave Pacifica 94044	(650)738-7470	R
<b>Transitional Housing</b>			
TLC SLE	Various locations	(800)852-7374	
W. Recovery Assoc.	1450 Chapin Ave Burlingame 94010	(650)348-6603	W
St. Vincent DePaul	50 North B St San Mateo 94401	(650)246-1520	W
Spring Street Trans.	2686 Spring St Redwood City 94063	(650)365-5772	MH
Maple Street Trans	1580A Maple St Redwood City 94063	(650)364-1150	V
Shelter Network	325 Villa Terrace San Mateo 94401	(650)340-8814	
Haven Family House	260 Van Buren Menlo Park 94025	(650)325-8719	
Redwood House	110 Locust St Redwood City 94061	(650)364-8264	F
<b>Food / Clothing Resources</b>			
Service League	727 Middlefield Redwood City 94063	(650)364-4664	
Fair Oaks Center	2600 Middlefield Redwood City 94025	(650)780-7500	
St. Francis Center	151 Buckingham Redwood City 94063	(650)365-7829	
S. H. Food Bank	1051 Bing St San Carlos 94070	(650)610-0800	
Opportunity Center	33 Encina Way Palo Alto 94301	(650)853-8672	
Samaritan House	4031 Pacific Blvd San Mateo 94403	(650)347-3648	
Samaritan House	603 Monte Diablo San Mateo 94403	(650)266-4591	
St Vincent de Paul	50 North B St San Mateo 94401	(650)343-4403	
St Vincent de Paul	344 Grand Ave S. San Francisco 94080	(650)589-9039	
N. Peninsula Center	600 Linden S. San Francisco 94080	(650)583-3373	
Covenant Church	740 Del Monte S. San Francisco 94080	(650)589-6797	
Hunger Program	2411 Pulgas Ave E. Palo Alto 94303	(650)323-7781	
St. Anthony's	3500 Middlefield Rd Menlo Park 94025	(650)366-4692	
Pen. Dining Center	31 Bepler St Daly City 94014	(650)994-5150	
D. C. Service Center	350 90th St Daly City 94105	(650)991-8007	
Pacifica Center	1809 Palmetto Ave Pacifica 94044	(650)738-7470	
<b>Substance Abuse Treatment</b>			
VA San Bruno OPC	1001 Sneath Ln #300 San Bruno 94066	(650)615-6000	V
(HVRP)	795 Willow Rd Menlo Park 94025	(800)848-7254	V
First Step	795 Willow Rd Menlo Park 94025	(650)617-2734	V
Behavioral Health	225 3th Ave #320 San Mateo 94403	(650)573-2541	
Health Dept	2000 Alameda Las Pulgas S. M. 94403	(650)573-3524	
Free At Last	1796 Bay Rd E. Palo Alto 94303	(650)462-6999	M/W
Common Ground	2560 Pulgas Ave E. Palo Alto 94303	(650)325-9544	M/W
Project Ninety	416 2nd Ave San Mateo 94401	(650)579-7881	M
Mission House	1668 S. Norfolk St San Mateo 94402	(650)341-3803	
Hope House	3789 Hoover St Redwood City 94063	(650)363-8769	W
Sequoia Center	650 Main St Redwood City 94063	(650)364-5504	M/W
Casa Adelita	160 Tehama Ct San Bruno 94066	(650)244-1444	W
Casa Los Hermanos	693 7th Ave San Bruno 94066	(650)244-1444	M
Casa Maria	105 McLain Ave Brisbane 94005	(650)244-1444	W

Jericho Project	470 Valley Dr Brisbane 94005	(415)656-1700	M
Women's Recovery	1450 Chapin Ave Burlingame 94010	(650)348-6603	W
<b>Employment Assistance</b>			
Peninsula-Works	271 92 <sup>nd</sup> St Daly City 94015	(650)301-8440	
Vocational Rehab	550 Quarry Rd San Carlos 94070	(650)802-6470	
Depart of Rehab	800 Menlo Ave #122 Menlo Park 94025	(650)688-6380	
Peninsula Works	1200 O'Brien Dr Menlo Park 94025	(650)330-6490	
Goodwill Industries	711 Santa Cruz Ave Menlo Park 94025	(650)324-9380	
Goodwill Industries	28 W 25th Ave San Mateo 94403	(650)293-8500	
Goodwill Industries	225 Kenwood S. San Francisco 94080	(650)737-9827	
Goodwill Industries	1215 California Dr Burlingame 94010	(650)373-1235	
ROP	1800 Rollins Rd Burlingame 94010	(650)598-2000	
<b>Legal / Financial Assistance</b>			
Legal Aid Program	521 E. 5 <sup>th</sup> Ave San Mateo 94402	(650)558-0915	
Samaritan House	4031 Pacific Blvd San Mateo 94403	(650)347-3648	
Bay Area Legal Aid	539 Middlefield Redwood City 94063	(650)472-2666	
Service League	727 Middlefield Redwood City 94063	(650)364-4664	
Action Life Line	139 Primrose Rd Burlingame 94010	(650)342-2255	
Human Services	550 Quarry Rd San Carlos 94070	(650)596-3299	
Social Security	800 S. Claremont St San Mateo 94402	(800)772-1213	

<b>SANTA BARBARA COUNTY</b>			
<b>Emergency Housing</b>			
Rescue Mission	535 E. Yanonali St S. Barbara 93103	(805)966-1316	M/W
Hospitality House	423 Chapala St Santa Barbara 93101	(805)962-6281	
Casa Esperanza	816 Cacique St Santa Barbara 93101	(805)884-8481	M/W
Family Shelter	423 E. Ortega St Santa Barbara 93101	(805)966-9668	F
Samaritan Shelter	401 W Morrison St Santa Maria 93458	(805)374-3338	
Marks Shelter	203 North N St Lompoc 93436	(805)735-9980	W/C
<b>Transitional Housing</b>			
Hospitality House	423 Chapala St Santa Barbara 93101	(805)962-6281	
Casa Esperanza	816 Cacique St Santa Barbara 93101	(805)884-8481	
Transition House	434 E. Ortega St Santa Barbara 93101	(805)966-9668	F
Solutions, Inc	1775 S. McClelland St S. Maria 93458	(805)347-0058	
Solutions, Inc	127 E. Carrillo St Santa Barbara 93101	(805)560-0919	
Casa Serena	1515 Bath St. Santa Barbara 93101	(805)966-1260	W
The Giving Tree	327 E. Victoria Santa Barbara 93101	(805)284-2194	W
All Star Recovery	5018 Calle Real Santa Barbara 93111	(805)698-4889	M
New House II	227 W. Haley St Santa Barbara 93101	(805)962-8248	M
New House III	2434 Bath St Santa Barbara 93105	(805)563-6050	M
Guydance House	906 W. Mission St S. Barbara 93101	(805)563-9521	M
Light House	721 Spring St Santa Barbara 93103	(805)882-2294	M
Victory Outreach	213 S. Oakley Santa Maria 93454	(805)922-1328	M
<b>Food / Clothing Resources</b>			

Salvation Army	200 W. Cook St Santa Maria 93454	(805)349-2421	
Catholic Charities	607 W. Main St Santa Maria 93454	(805)922-2059	
Foursquare Church	709 N. Curryer St Santa Maria 93454	(805)922-8445	
Catholic Charities	903 E. Chestnut Lompoc 93436	(805)736-6226	
Unity Shoppe	1219 State St Santa Barbara 93101	(805)564-4402	
<b>Substance Abuse Treatment</b>			
VA Santa Barbara	4440 Calle Real Santa Barbara 93110	(805)683-1491	V
Rescue Mission	535 E. Yanonali St S. Barbara 93103	(805)966-1316	M/W
Casa Serena	1515 Bath St Santa Barbara 93101	(805)966-1260	W
Rescue Mission	1207 N. McClelland St S. Maria 93454	(805)614-0220	M
A Spiritual Abode	830 W. Church St Santa Maria 93458	(805)925-1352	M/W
Public Health Svc	300 N. San Antonio S. Barbara 93110	(805)681-5102	
Indian Health Svc	4141 State St #B-2 S. Barbara 93110	(805)681-7144	
Tribal Health Clinic	90 Via Juana Lane Santa Ynez 93460	(805)688-7070	
<b>Employment Assistance</b>			
Workforce Center	130 E. Ortega St Santa Barbara 93101	(805)568-1296	
Workforce Center	1410 S. Broadway # A S. Maria 93454	(805)614-1550	
Employment Center	509 W. Morrison Ave S. Maria 93458	(805)928-1737	
Depart of Rehab	2615 S. Miller St #101 S. Maria 93455	(805)928-1891	
<b>Legal / Financial Assistance</b>			
Action Commission	120 W. Chestnut Ave Lompoc 93436	(805)740-4555	
Salvation Army	200 W. Cook St Santa Maria 93454	(805)349-2421	
Alexander House	P.O. Box 23642 Santa Barbara 93121	(805)966-3665	
Social Services	234 Camino Remedio S. Barbara 93110	(805)681-4405	

<b>SANTA CLARA COUNTY</b>			
<b>Emergency Housing</b>			
Hospitality House	405 N. 4 <sup>th</sup> St San Jose 95112	(408)282-1175	M
City Team Ministry	1174 Old Bayshore San Jose 95131	(408)288-2153	M
Supportive Housing	692 N. King Rd San Jose 95133	(408)926-8885	F
Little Orchard	2011 Little Orchard St S. Jose 95125	(408)294-2171	V
Veterans Housing	10 Kirk Ave San Jose 95127	(408)533-0228	V
Opportunity Center	33 Encina Ave Palo Alto 94301	(650)853-8672	
Community Solution	P.O. Box 546 Morgan Hill 95037	(408)776-6294	DV
<b>Transitional Housing</b>			
West Valley Svc	10104 Vista Dr Cupertino 95014	(408)255-8033	
Community Solution	9015 Murray Ave #100 Gilroy 95020	(408)846-4775	
TLC Sober Living	P.O. Box 1189 Danville 94526	(800)852-7374	
Gateway	16433 Monterey St Morgan Hill 95037	(800)488-9919	
City Team Ministry	1174 Old Bayshore San Jose 95131	(408)288-2153	M
Emmanuel House	405 N. 4 <sup>th</sup> St San Jose 95112	(408)282-1175	
EHC LifeBuilders	2011 Little Orchard San Jose 95125	(408)294-2100	V
Veterans Housing	10 Kirk Ave San Jose San Jose 95127	(408)533-0228	V
Mackey House	1022 Locust St San Jose 95110	(650)678-8583	M

Project Ninety	561 South 9th St San Jose 95112	(650)579-7881	M
<b>Food / Clothing Resources</b>			
Boccardo Center	2011 Little Orchard St San Jose 95125	(408)294-2100	V
Georgia Travis Ctr.	297 Commercial St San Jose 95112	(408)453-3124	
Loaves & Fishes	777 N. First St #420 San Jose 95112	(408)998-1500	
Salvation Army	405 N. 4th St San Jose 95112	(408)282-1175	
Marthas Kitchen	311 Willow St San Jose 95110	(408)293-6111	
Louise's Pantry	1381 S. 1st St San Jose 95110	(408)278-2160	
Urban Ministries	778 S. Almaden Ave San Jose 95110	(408)292-3314	
A.A. Service Agency	304 N. Sixth St San Jose 95112	(408)292-3157	
Saint Luke's Pantry	20 University Ave Los Gatos 95030	(408)354-2195	
House of Hope	16330 Los Gatos Blvd Los Gatos 95032	(408)356-5126	
St. Joseph Center	7950 Church St Gilroy 95020	(408)842-6662	
<b>Substance Abuse Treatment</b>			
VA San Jose Clinic	80 Great Oaks Blvd San Jose 95119	(408)363-3000	V
Mental Health	828 S. Bascom #200 San Jose 95128	(408)885-5770	
Amicus House	466 S. Buena Vista San Jose 95126	(408)294-2277	Coed
Pathway House	102 S. 11th St San Jose 95112	(408)998-5191	Coed
New Life Centers Inc	473 N. San Pedro San Jose 95110	(408)297-1182	Coed
New Life Centers Inc	1101 Park Ave San Jose 95126	(408)297-1182	Coed
Salvation Army	702 W. Taylor St San Jose 95126	(408)298-7600	M
Horizon South	650 S. Bascom Ave San Jose 95128	(408)283-8555	M
Benny McKeown	1281 Fleming Ave San Jose 95127	(408)370-9688	M
City Team Int.	580 Charles St San Jose 95112	(408)288-2185	M
Christian Recovery	14201 Buckner Dr San Jose 95127	(408)363-1624	W
House of Grace	2304 Zanker Rd San Jose 95131	(408)232-5600	W
Mariposa Lodge	9500 Malech Rd San Jose 95151	(408)281-6555	W
Project Ninety	792 S. 3rd St San Jose 95112	(408)295-3799	W
<b>Employment Assistance</b>			
Future One-Stop	2450 S. Bascom Ave Campbell 95008	(408)369-3606	
Future One-Stop	7800 Arroyo Circle #A Gilroy 95020	(408)846-1480	
One-Stop Office	17666 Crest Ave Morgan Hill 95037	(408)776-8248	
Future One-Stop	1601 Foxworthy Ave San Jose 94118	(408)794-1100	
Connect Job Center	505 W. Olive #550 Sunnyvale 94086	(408)730-7232	
S H Community Svc	1381 S. 1st St San Jose 95110	(408)278-2160	
Goodwill Program	1080 N. 7 <sup>th</sup> St San Jose 95112	(408)869-9128	V
Depart of Rehab	100 Paseo de San Antonio S.J. 95113	(408)277-1355	
<b>Legal / Financial Assistance</b>			
Law Foundation	152 N. 3rd St 3rd Flr San Jose 95112	(408)293-4790	
Legal Aid Society	480 N 1st St Ste 100 San Jose 95112	(408)998-5200	
Pro Bono Project	480 N. 1st St Ste 219 San Jose 95112	(408)998-5298	
Community Services	725 Kifer Rd Sunnyvale 94086	(408)738-4321	
Community Services	10104 Vista Dr Cupertino 95014	(408)255-8033	
EHC Life Builders	2011 Little Orchard San Jose 95125	(408)294-2100	V
Social Security	280 S. First St 2nd Fl San Jose 95113	(866)331-2235	

Social Services	1919 Senter Rd San Jose 95112	(408)758-3800	
Catholic Charities	2625 Zanker Rd San Jose 95134	(408)468-0100	

<b>SANTA CRUZ COUNTY</b>			
<b>Emergency Housing</b>			
Rebele Shelter	115 Coral St Santa Cruz 95060	(831)458-6020	F
River Street Shelter	115 Coral St Santa Cruz 95060	(831)459-6644	
Salvation Army	112 Grant St Watsonville 95076	(831)724-3922	M
Pajaro Mission	111 Railroad Ave Santa Cruz 95076	(831)724-9576	M
Pajaro Valley Svc	115 Brennan St Watsonville 95076	(831)728-5649	W
New Life Services	707 Fair Ave Santa Cruz 95060	(831)427-1007	W
<b>Transitional Housing</b>			
Homeless Center	115 Coral St Santa Cruz 95060	(831)458-6020	
New Life Services	707 Fair St Santa Cruz 95060	(831)427-1007	W/C
Paget Center	831 Paget Ave Santa Cruz 95062	(831)475-5591	V
River Street Shelter	115 Coral St Santa Cruz 95060	(831)459-6644	
Jesus, Mary Joseph	132 Lennox St Santa Cruz 95060	(831)459-8046	W/C
Family in Transition	406 Main St #326 Watsonville 95076	(831)728-9791	
<b>Food / Clothing Resources</b>			
Salvation Army	721 Laurel St Santa Cruz 95060	(831)426-8365	
Familia Center	711 E. Cliff Dr Santa Cruz 95060	(831)423-5747	
St. Vincent de Paul	210 High St #104 Santa Cruz 95060	(831)423-0878	
St. Francis Kitchen	205 Mora St Santa Cruz 95060	(831)459-6712	
Elm Street Mission	117 Elm St Santa Cruz 95060	(831)420-0543	
Day Resource Ctr.	115 Coral St Santa Cruz 95060	(831)458-6020	
Christian Center	376 S. Green Valley Watsonville 95076	(831)728-1424	
Salvation Army	214 Union St Watsonville 95076	(831)763-0131	
Valley Churches	9400 Hwy 9 Ben Lomond 95005	(831)336-8258	
Second Harvest	800 Ohlone Pkwy Watsonville 95076	(831)722-7110	
<b>Substance Abuse Treatment</b>			
VA Capitola Clinic	1350 41st Ave Capitola 95010	(831)464-5519	V
Mental Health Svc	1400 Emeline #K Santa Cruz 95060	(831)454-4170	
Health Center	1080 Emeline Ave Santa Cruz 95060	(831)454-4100	
S C Residential	125 Rigg St Santa Cruz 95060	(831)423-3890	Coed
Coral Street Clinic	115-A Coral St Santa Cruz 95060	(831)454-2080	
New Life Services	707 Fair Ave Santa Cruz 95060	(831)427-1007	
Alto Counseling Ctr.	740 Front St Santa Cruz 95060	(831)423-2003	
Si Se Puede	161 Miles Lane Watsonville 95076	(831)761-5422	
Mental Health Svc	1430 Freedom Blvd Watsonville 95076	(831)763-8200	
Recovery Center	3600 Glen Canyon Rd S. Valley 95066	(831)438-1868	Coed
<b>Employment Assistance</b>			
One Stop Center	2045 40 <sup>th</sup> Ave #B Capitola 95010	(831)464-6286	
Depart of Rehab	1350 41st Ave #101 Capitola 95010	(831)465-7100	
Work Force Develop	350 Encinal St Santa Cruz 95060	(831)429-6415	

Goodwill Industries	350 Encinal St Santa Cruz 95060	(831)423-8611	
Gemma	501 Soquel Ave Santa Cruz 95062	(831)457-4560	
One Stop Center	18 W. Beach St Watsonville 95076	(831)-763-8700	
<b>Legal / Financial Assistance</b>			
Rural Legal Assist	21 Carr St Watsonville 95076	(831)724-2253	
Human Services	119 W. Beach St Watsonville 95076	(831)763-8500	
Social Security	169 Walnut Ave Santa Cruz 95060	(800)593-8523	

<b>SHASTA COUNTY</b>			
<b>Emergency Housing</b>			
Good News Mission	3100 South St Redding 96001	(530)241-5754	M/W
Women's Refuge	2280 Benton Dr Bldg A Redding 96003	(530)244-0687	DV
House of Hope	3100 S. Market St Redding 96001	(530)241-3608	W/C
House of Cornelius	2825 West St Unit 1 Redding 96001	(530)242-1121	M
<b>Transitional Housing</b>			
VRP – End Times	1871 Kenyon Dr Redding 96001	(530)524-2788	M
Faith Works (CC)	2825 W. St Redding 96001	(530)242-1492	M/W
Ministries for Christ	3626 Railroad Ave Redding 96001	(530)276-7947	M
Samaritan Homes	1752 Tehama St Redding 96001	(530)243-4615	V
Legacy House	6893 Happy Valley Rd Anderson 96007	(530)365-9119	M
The Rock Center	755 Lake Blvd Redding 96003	(530)229-1704	M
Francis Court	2825 West St Unit 1 Redding 96001	(530)242-1121	F/C
<b>Food / Clothing Resources</b>			
People of Progress	1242 Center St Redding 96001	(530)243-3811	
Social Services	2400 Washington Ave Redding 96001	(530)241-0552	
Rescue Mission	3100 South St Redding 96001	(530)241-5754	
Salvation Army	2691 Larkspur Lane Redding 96002	(530)222-2207	
Christian Assistance	2979 E. Center St Anderson 96007	(530)365-4220	
<b>Substance Abuse Treatment</b>			
VA Redding OPC	351 Hartnell Ave Redding 96002	(530)226-7555	V
Health Services	2640 Breslauer Way Redding 96001	(530)225-5252	
Social Service	2400 Washington Ave Redding 96001	(530)241-0552	
Empire Rec. Center	1237 California St Redding 96001	(530)243-7470	M/W
Good News Mission	3100 South St Redding 96001	(530)241-5754	
Visions of the Cross	3648 El Portal Dr Redding 96002	(530)722-1114	W
Tribal Health Center	1441 Liberty St Redding 96001	(530)224-2700	NA
<b>Employment Assistance</b>			
Depart of Rehab	1900 Churn Creek Rd Redding 96002	(530)224-4708	
EDD	1325 Pine St Redding 96001	(530)225-2185	
Goodwill Industries	1643 Hilltop Dr Redding 96002	(530)351-7677	
Vet Resource Ctr.	280 Hemsted Dr #100 Redding 96002	(530) 223-3211	
One Stop Center	1201 Placer St Redding 96001	(530)246-7911	
<b>Legal / Financial Assistance</b>			
Nor-Cal Legal Svc	1370 West St Redding 96001	(530)241-3565	



Vet Resource Ctr.	280 Hemsted Dr #100 Redding 96002	(530) 223-3211	
Veteran Services	1855 Shasta St Redding 96001	(530)225-5616	
People of Progress	1242 Center St Redding 96001	(530)243-3811	
Salvation Army	2691 Larkspur Lane Redding 96002	(530)222-2207	
Human Services	36911 Main St (299E) Burney 96013	(530)335-5576	
Human Services	2757 Churn Creek Rd Redding 96002	(530)224-4200	
Human Services	1220 Sacramento St Redding 96001	(530)229-8441	
Human Services	4216 Shasta Dam Shasta Lake 96019	(530)275-7500	

<b>SIERRA COUNTY</b>			
<b>Housing Resources</b>			
Rescue Mission	4250 Lincoln Blvd Oroville 95966	(530)533-9120	M/F
<b>Food / Clothing Resources</b>			
Western Sierra MC	209 Nevada St Downieville 95936	(530)289-3298	
<b>Substance Abuse Treatment</b>			
VA Sierra Nevada	1000 Locust St Reno 89502	(775)786-7200	V
Mental Health	704 Mill St Loyalton 96118	(530)993-6746	
AOD Services	704 Mill St Loyalton 96118	(530)993-6748	
Public Health	202 Front St Loyalton 96118	(530)993-6700	
<b>Employment Assistance</b>			
Work-force Center	306 First St #1 Loyalton 96118	(530)993-4295	
<b>Legal / Financial Assistance</b>			
Social Services	202 Front St Loyalton 96118	(530)993-6700	

<b>SISKIYOU COUNTY</b>			
<b>Emergency Housing</b>			
Family Center	11920 Main St Fort Jones 96032	(530)468-2450	R
Community Center	201 S. Broadway St Yreka 96097	(530)842-1313	R
Family Center	38 Park Way Happy Camp 96039	(530)493-5117	R
C.A.A.	818 S. Main St Yreka 96097	(530)841-2700	R
Response Network	P.O. Box 972 Weaverville 96093	(800)358-5251	R
Community Center	Tule Creek Rd Hayfork 96041	(530)628-4565	R
<b>Transitional Housing</b>			
Lane Street Effort	417 Lane St Yreka 96097	(530)842-7486	M
Oxford House	450 Payne Lane Yreka 96097	(530)937-3242	M
<b>Food / Clothing Resources</b>			
Salvation Army	P.O. Box 651 Etna 96027	(530)467-5550	
Food Pantry	107 Newton St Fort Jones 96032	(530)468-5321	
Food Ministry	805 Juvenile Lane Yreka 96097	(530)841-4376	
Food Pantry	150 S.12th St Montague 96064	(530)459-5414	
St. Joseph's Church	314 4th St Yreka 96097	(530)842-4874	
St. Anthony's Church	507 Pine St Mt. Shasta 96067	(530)926-4477	

St. Barnabas Church	701 Lassen Lane Mt. Shasta 96067	(530)926-5326	
Great Northern Corp	780 S. Davis Ave Weed 96094	(530)938-4115	
<b>Substance Abuse Treatment</b>			
VA Yreka OPC	101 E. Oberlin Drive Yreka 96097	(530)841-8500	V
AOD Services	2060 Campus Dr Yreka 96097	(530)841-4100	
Public Health	806 S. Main St Yreka 96097	(530)841-2100	
Tribal Health Clinic	1519 S. Oregon St Yreka 96097	(530)842-9200	NA
<b>Employment Assistance</b>			
STEP	310 Boles St Weed 96094	(530)938-3231	
Depart of Rehab	500 N. Main St Yreka 96097	(530)842-1662	
<b>Legal / Financial Assistance</b>			
Nor-Cal Legal Svc	1370 West St Redding 96001	(530)241-3565	
Family Law	311 Fourth St #206 Yreka 96097	(530)842-0197	
Great Northern Corp	780 S. Davis Ave Weed 96094	(530)938-4115	
Human Services	818 S. Main St Yreka 96097	(530)841-2700	

<b>SOLANO COUNTY</b>			
<b>Emergency Housing</b>			
Christian Help Ctr.	2166 Sacramento St Vallejo 94590	(707) 553-8192	M/W/F
Mission Solano	740 Travis Blvd Fairfield 94533	(707)759-5727	M
Bridge to Life	310 Beck Ave Fairfield 94533	(707)718-4782	
Heather House	724 Ohio St Fairfield 94533	(707)427-8566	M/W/C
Opportunity House	267 Bennett Ct Vacaville 95688	(707)447-1988	W/C
LIFT3 Sup Group	P. O. Box 5251 Vallejo 94591	(707)398-6865	DV
<b>Transitional Housing</b>			
Bridge to Life	310 Beck Ave Fairfield 94533	(707)718-4782	
V.E.T.S. Housing	416 Union Ave Fairfield 94533	(707)427-1148	M/W
Opportunity House	267 Bennett Ct Vacaville 95688	(707)447-1988	W/C
Family Services	1017 Tennessee St Vallejo 94590	(707)557-5896	
Threshold Home	69 Beverly Dr Vallejo 94591	(707)644-0272	M
AOD Council	419 Pennsylvania St Vallejo 94590	(707)643-2715	M/W
Mission Solano	740 Travis Blvd Fairfield 94533	(707)759-5727	
Hope Haven	164 Robles Dr Vallejo 94591	(707)554-9781	
Harvest House	1315 Military West Benicia 94510	(707)888-4058	
Stepping Stones	460 East L St Benicia 94510	(707)334-1220	M/W
Action Council	416 Union Ave Fairfield 94533	(707)427-1148	
<b>Food / Clothing Resources</b>			
Action Council Inc	416 Union Ave Fairfield 94533	(707)427-1148	
Food Bank	2339 Courage Dr #F Fairfield 94533	(707)421-9777	R
Family Services	155 N 2nd St Dixon 95620	(707)678-0442	
Salvation Army	1200 Missouri St Fairfield 94533	(707)426-6244	
St. Peter's Church	105 South 2nd St Dixon 95620	(707)678-9424	
St. Mary's Food	350 Stinson Ave Vacaville 95688	(707)448-2390	
Catholic Services	125 Corporate Pl #A Vallejo 94590	(707)644-8909	

Help Center	2166 Sacramento St Vallejo 94590	(707)553-8192	
Hope Center	929 Amador St Vallejo 94590	(707)648-1986	
Action Council	480 Military East Benicia 94510	(707)745-0900	
St. Paul's Church	120 East J St Benicia 93449	(707)745-0307	
St. Vincent de Paul	475 East I St Benicia 94510	(707)746-1773	
Church of Christ	2200 Fairfield Ave Fairfield 94533	(707)425-2373	
Manna Pantry	1600 Union Ave Fairfield 94533	(707)422-4741	
Epiphany Church	300 West St Vacaville 95688	(707)448-2275	
St. Paul Outreach	101 West St Vacaville 95688	(707)448-5154	
Family Services	155 North 2nd St Dixon 95620	(707)678-0442	
Salvation Army	630 Tuolumne St Vallejo 94590	(707)643-8621	
Church of God	21 Antioch Dr Vallejo 94589	(707)647-1005	
Calvary Church	585 Mini Dr Vallejo 94590	(707)642-6585	
Emmanuel Arms	900 6th St Vallejo 94590	(707)642-2391	
1st Baptist Church	2025 Sonoma Blvd Vallejo 94591	(707)644-4064	
Samaritan Church	407 Capital St Vallejo 94590	(707)553-1896	
<b>Substance Abuse Treatment</b>			
VA Fairfield OPC	103 Bodin Cir Travis AFB Fairfield	(707)437-1800	V
Public Health	355 Tuolumne St Vallejo 94590	(707)553-5572	
Mental Health	275 Beck Ave Fairfield 94533	(707)784-8320	
Mental Health	2101 Courage Dr Fairfield 94533	(707)784-2080	
Shameya Center	126 Ohio St Vallejo 94590	(707)644-2577	W
Genesis House	1149 Warren Ave Vallejo 94591	(707)552-5295	M/W
Healthy Partners	1735 Enterprise Dr Fairfield 94533	(707)425-1799	
(BASN)	2101 Courage Dr Fairfield 94533	(707)784-2220	
Victory Outreach	1200 Civic Center Dr Fairfield 94533	(707)430-8938	
Archway Services	1525 Union Ave Fairfield 94533	(707)435-1804	M
Rays of Hope	740 Travis Blvd Fairfield 94533	(707)422-1011	M
House of Acts	627 Grant St Vallejo 94590	(707)553-1042	M/W
Adobe	1385 West K St Benicia 94510	(707)745-6276	M
Principles	371 Bowline Dr Vacaville 95688	(707)449-4733	M
<b>Employment Assistance</b>			
Vocational Center	180 Grobric Ct Fairfield 94534	(707)864-5440	
Employment Con.	320 Campus Lane Fairfield 94534	(707)863-3354	
EDD	1440 Marin St Vallejo 94590	(707)649-3604	
Depart of Rehab	450 Chadbourne #A Fairfield 94534	(707)428-2080	
Human Develop.	1735 Enterprise 105 Fairfield 94533	(707)678-3266	
Action Council Inc	416 Union Ave Fairfield 94533	(707)427-1148	
Living Resources	470 Chadbourne Rd Fairfield 94534	(707)435-8174	
Goodwill Job Ctr.	180 Grobric Ct Fairfield 94534	(707)864-5440	
<b>Legal / Financial Assistance</b>			
Community Svc	1105 A Airport Blvd Rio Vista 94571	(707)374-5706	
Action Council	480 Military East Benicia 94510	(707)745-0900	
Action Council	416 Union St Fairfield 94533	(707)427-1148	

Salvation Army	1216 Missouri St Fairfield 94533	(707)426-6244	
Social Services	125 Corporate Pl Vallejo 94590	(707)644-8909	
Families Transition	P. O. Box 321 Benicia 94510	(707)645-3000	
St. Vincent de Paul	475 East I St Benicia 94510	(707)746-1773	
Family Services	155 N 2nd St Dixon 95620	(707)678-0442	
Independent Living	470 Chadbourne Rd Fairfield 94534	(707)435-8174	
Social Services	275 Beck Ave Fairfield 94533	(707)784-8050	
Social Services	355 Tuolumne St Vallejo 94533	(707)553-5681	
Nor-Cal Legal Svc	1810 Capitol St Vallejo 94590	(707)643-0054	
Lawyer in Library	1020 Ulatis Dr Vacaville 95687	(866)572-7587	
Legal Center	600 Union Ave Fairfield 94533	(707)207-7348	
Bar Association	P.O. Box 3524 Fairfield 94533	(707)422-0127	R
V. E. C	675 Texas St #4700 Fairfield 94533	(707)784-6590	
Social Security	1 Harbor Ctr #150 Suisun City 94585	(800)772-1213	

SONOMA COUNTY			
Emergency Housing			
Redwood Mission	101 6 <sup>th</sup> St Santa Rosa 95401	(707)542-4817	M
The Rose	101 6 <sup>th</sup> St Santa Rosa 95401	(707)573-0490	W/C
Catholic Charities	600 Morgan St Santa Rosa 95401	(707)525-0226	R
Catholic Charities	465 A St Santa Rosa 95401	(707)542-5426	F
Mary Isaak Center	900 Hopper St Petaluma 94952	(707)776-4777	M/W
Overnight Support	151 1 <sup>st</sup> St. W. Sonoma 95476	(707)939-6777	M/W/C
Wallace House	126 N Main St Cloverdale 95425	(707)894-2727	M/W/C
Family Center	465 A St Santa Rosa 95402	(707)542-5426	R
Transitional Housing			
North Bay VRC	2455 Bennett Valley S. Rosa 95404	(707)578-8387	V
Inter Faith Shelter	2500 Vallejo St Santa Rosa 95401	(707)546-7907	M/W
Catholic Charities	465 A St Santa Rosa 95403	(707)542-5426	F/C
Shaniah House	122 Calistoga Rd S. Rosa 95409	(707)524-7848	M/W
Turning Point	440 Arrowwood Dr S. Rosa 95407	707-284-2950	Coed
Shaniah House	4415 Hoen Ave Santa Rosa 95409	(707)328-6827	M/F
COTS	900 Hooper St Petaluma 94952	(707)765-6530	M
The Salvation Army	721 So. McDowell Petaluma 94952	(707)769-0716	Coed
A Step Up	420 E. Cotati Ave Cotati 94931	(707)795-4336	
Food / Clothing Resources			
Adventist Church	840 Sonoma Ave S. Rosa 95404	(707)578-8883	
Covenant Church	3175 Sebastopol Rd S. Rosa 95407	(707)528-8463	
Salvation Army	93 Stony Point Circle S Rosa 95401	(707)542-0998	
St. Vincent de Paul	600 Morgan St Santa Rosa 95401	(707)528-7580	
Food Pantry	825 Middlefield Dr Petaluma 94952	(707)763-2454	
The Salvation Army	721 S. McDowell Petaluma 94952	(707)769-0716	
St. Andrews	20329 Hwy116 Monte Rio 95462	(707)865-0834	
Food Pantry	202 Commercial Cloverdale 95425	(707)894-7896	

Food for Thought	6550 Railroad Ave Forestville 95436	(707)887-1647	
<b>Substance Abuse Treatment</b>			
Santa Rosa VA OPC	3841 Brickway Blvd S. Rosa 95403	(707)569-2300	V
Medical Services	2550 Paulin Dr Santa Rosa 95401	(707)565-2715	
Mental Health	3322 Chanate Rd S. Rosa 95404	(707)564-4850	
Health Services	625 5th St Santa Rosa 95404	(707)565-4487	
Indian Health	144 Stony Point Rd S. Rosa 95401	(707)521-4545	NA
North Bay VRC	2455 Bennett Valley S. Rosa 95404	(707)578-8387	V
Turning Point	440 Arrowood Dr S. Rosa 95407	(707)284-2950	Coed
Athena House	3555 Sonoma Hwy S. Rosa 95409	(707)526-3150	W
Gospel Mission	101 6 <sup>th</sup> St. Santa Rosa 95401	(707)542-4817	M
Mana Home	2032 Dennis Lane S Rosa 95403	(707)576-1471	W
(CHD)	3315 Airway Dr Santa Rosa 95403	(707)523-2242	Coed
Victory Outreach	4036 Sebastopol Rd S. Rosa 95407	(707)541-0978	M/W
A Step Up	420 E. Cotati Ave Cotati 94931	(707)795-4336	MH
<b>Employment Assistance</b>			
Job Link	2227 Capricorn 100 S. Rosa 95407	(707)565-5550	
Depart of Rehab	50 D St Ste 425 Santa Rosa 95404	(707)576-2233	
<b>Legal / Financial Assistance</b>			
Veterans Free Legal	3841 Brickway Blvd S. Rosa 95403	(707)569-2300	V
Cal Rural Assistance	725 Farmers Lane S. Rosa 95405	(707)528-9941	
Legal Aid	1445 E St Santa Rosa 95404	(707)542-1290	
Face to Face	873 Second St Santa Rosa 95404	(707)544-1581	
Human Services	2550 Paulin Dr Santa Rosa 95401	(707)565-2715	
Social Security	2099 Range Ave Santa Rosa 95401	(877)870-6384	

<b>STANISLAUS COUNTY</b>			
<b>Emergency Housing</b>			
C. Housing/Shelter	936 McHenry Ave #131 Modesto 95350	(209)574-1149	M/W
Salvation Army	320 9 <sup>th</sup> St Modesto 95351	(209)525-8954	M/W
Salvation Army	625 I St Modesto 95351	(209)523-7577	
Gospel Mission	1400 Yosemite Blvd Modesto 95353	(209)529-8259	M/W
Haven Center	618 13th St Modesto 95354	(209)524-4331	W
<b>Transitional Housing</b>			
Gospel Mission	1400 Yosemite Blvd Modesto 95354	(209)529-8259	M/W
Freedom in Truth	10059 Lyons Rd Ripon 95366	(209)324-7297	
New Hope II	823 E. Orangeburg Ave Modesto 95350	(209)527-9797	M/W
Transitions	409 Coolidge Ave Modesto 95350	(209)534-1821	M/C
New Beginnings	1201 Trombetta Ave Modesto 95350	(209)572-2725	W/C
Women's Center	1030 California Ave Modesto 95351	(209)550-7352	W/C
Heavens Haven	326 E. Hatch Rd Modesto 95351	(209)303-7287	M/W
Victory for Veterans	1413 Vernon St Modesto 95351	(209)496-2500	V
Turner Care	2317 Janna Ave Modesto 95350	(209)552-5270	MH
Victory Outreach	1219 N. Carpenter Rd Modesto 95351	(209)652-8912	

<b>Food / Clothing Resources</b>			
Salvation Army	625 I St Modesto 96353	(209)523-7577	
Interfaith Ministries	120 Kerr Ave Modesto 95354	(209)572-3117	
United Samaritans	1416 Maze Blvd Modesto 95354	(209)668-4853	
United Samaritans	220 S. Broadway Turlock 95380	(209)668-4853	
Salvation Army	893 Lander Ave Turlock 95380	(209)667-6091	
United Samaritans	2413 3rd St Hughson 95326	(209)883-9212	
<b>Substance Abuse Treatment</b>			
Modesto VA Clinic	1225 Oakdale Rd Modesto 95355	(209)557-6200	V
Behavioral Health	800 Scenic Dr Bldg 4 Modesto 95340	(209)525-6225	
Public Health	830 Scenic Dr Modesto 95351	(209)558-7000	
New Hope Recovery	823 E. Orangeburg Ave Modesto 95350	(209)527-9797	M/W
Nirvana Treatment	1028 Reno Ave Modesto 95351	(209)579-1103	M/W
Freedom In Truth	10059 Lyons Rd Ripon 95366	(209)324-7297	M
Recovery Center	1904 Richland Ave Ceres 95307	(209)541-2121	M/W
<b>Employment Assistance</b>			
EDD	629 12 <sup>th</sup> St Modesto 95353	(209)558-9675	
Depart of Rehab	1209 Woodrow Ave #B1 Modesto 95350	(209)576-6220	
Friends Outside	500 9th St Ste K-3 Modesto 95354	(209)522-2209	
Opportunity Center	1581 Cummins Dr #100 Modesto 95358	(209)577-3210	
Workforce Services	125 N. Broadway Turlock 95380	(209)664-8306	
Goodwill	601 N. Golden State Blvd Turlock 95380	(209)669-6535	
Alliance Work-net	1405 West F St Ste I Oakdale 95361	(209)322-3564	
<b>Legal / Financial Assistance</b>			
Social Services	251 E. Hackett Rd Modesto 95355	(209)558-2777	
Social Security	1521 N. Carpenter #E-1 Modesto 95351	(800)772-1213	

<b>SUTTER COUNTY</b>			
<b>Housing Resources</b>			
Casa Esperanza	PO Box 56 Yuba City 95992	(530)674-2040	DV
Salvation Army	401 Del Norte Ave Yuba City 95991	(530)216-4530	M/W
<b>Food / Clothing Resources</b>			
Gleaners Food Bank	760 Stafford Way Yuba City 95991	(530)673-3834	
St. Andrews Church	1390 Franklin Rd Yuba City 95993	(530)673-7353	
<b>Substance Abuse Treatment</b>			
VA Chico OPC	280 Cohasset Rd Chico 95926	(530)879-5000	V
Public Health	1445 Veterans Memorial Dr Y.C. 95991	(530)822-7240	
Mental Health	1965 Live Oak Blvd Yuba City 95991	(530)822-7208	
Salvation Army	401 Del Norte Ave Yuba City 95991	(530)216-4530	M/W
Pathway Program	430 Tee Garden Ave Yuba City 95991	(530)674-4530	M/W
<b>Employment Assistance</b>			
One-Stop Center	950 Tharp Rd #1000 Yuba City 95993	(530)822-5120	
Tribal TANF	673 Shasta St Yuba City 95991	(530)671-5401	NA

Dept of Rehab	1237 Live Oak Ste B Yuba City 95991	(530)822-4591	
Employment Svc	543A Garden Hwy Yuba City 95991	(530)822-7133	
R.O.P	970 Klamath Lane Yuba City 95993	(530)822-2952	
Goodwill Industries	1242 Colusa Ave Yuba City 95991	(530)674-0953	
<b>Legal / Financial Assistance</b>			
The Salvation Army	401 Del Norte Ave Yuba City 95991	(530)216-4530	
Hands of Hope	909 Spiva Ave Yuba City 95991	(530)-755-3491	
Tribal TANF	673 Shasta St Yuba City 95991	(530)671 5401	NA
Social Services	539 Garden Hwy #C Yuba City 95991	(530)822-7238	

<b>TEHAMA COUNTY</b>			
<b>Housing Resources</b>			
P.A.T.H.	PO Box 315 Red Bluff 96080	(530)529-5599	
Alt to Violence	717 Pine St Red Bluff 96080	(530)528-0226	
Legacy House	605 Johnson St Red Bluff 96080	(530)529-2279	
Choices for Change	P.O. Box 928 Red Bluff 96080	(530)527-4975	
<b>Food / Clothing Resources</b>			
Christian Assistance	710 4th St Corning 96021	(530)824-3866	
Dorcas Center	24751 South Ave Corning 96021	(530)824-2153	
Guardian Angel	8320 Hwy 99 Los Molinos 96055	(530)384-9857	
Harvest Center	1006 Sixth Ave Corning 96021	(530)824-2091	
Salvation Army	940 Walnut St Red Bluff 96080	(530)527-8530	
Senior Center	1500 S. Jackson Red Bluff 96080	(530)527-8177	
Senior Center	1015 4th Ave Corning 96021	(530)824-4727	
Vineyard Church	738 Walnut St Red Bluff 96080	(530)529-5430	
Hope Chest	1359 Grant St Red Bluff 96080	(530)527-0270	
Resource Center	220 Sycamore St #101 Red Bluff 96080	(530)528-8066	
Seventh-Day Church	720 S. Jackson St Red Bluff 96080	(530)527-3733	
Food Bank	20699 Walnut St Red Bluff 96080	(530)529-2264	
<b>Substance Abuse Treatment</b>			
VA Redding OPC	351 Hartnell Ave Redding 96002	(530)226-7555	V
Mental Health Svc	1445 Vista Way Red Bluff 96080	(530)529-4013	
Health Services	275 Solano St Corning 96021	(530)824-4890	
Health Services	818 Main St Red Bluff 96080	(530)527-6824	
Mental Health Svc	1860 Walnut St #A Red Bluff 96080	(530)527-5631	
Indian Health Clinic	2500 Main St Red Bluff 96080	(530)529-2567	
County AOD Svc	1850 Walnut St #G Red Bluff 96080	(530)527-7893	
<b>Employment Assistance</b>			
Business Connect	332 Pine St Red Bluff 96080	(530)527-6229	
EDD	1325 Pine St Redding 96001	(800)480-3287	
Job Training Center	718 Main St Red Bluff 96080	(530)529-7000	
Occupation Program	1135 Lincoln St Red Bluff 96080	(530)527-5811	
Depart of Rehab	705 Pine St Red Bluff 96080	(530)529-4270	

<b>Legal / Financial Assistance</b>			
CLIC	25 Main St Ste 102 Chico 95926	(530)898-4354	
Nor-Cal Legal Svc	541 Normal Ave Chico 95927	(530)345-9493	
SHARP	345 Pine St Red Bluff 96080	(530)527-8649	
Social Services	310 S. Main St Red Bluff 96080	(530)527-1911	

<b>TRINITY COUNTY</b>			
<b>Housing / Food / Clothing Resources</b>			
Hayfork Center	154 Tule Creek Rd Hayfork 96041	(530)628-4571	
H. R. N.	111 Mtn. View St Weaverville 96093	(530)623-2024	
<b>Substance Abuse Treatment</b>			
VA Redding OPC	351 Hartnell Ave Redding 96002	(530)226-7555	V
Behavioral Health	1450 Main St Weaverville 96093	(530)623-1362	
Public Health	51 Industrial Pkwy Weaverville 96093	(530)623-1265	
AOD Services	154B Tule Creek Rd Hayfork 96041	(530)628-4111	
Public Health	154 Tule Creek Rd Hayfork 96041	(530)623-8209	
Trinity Health Svc	321 Van Duzen Mad River 95552	(707)574-6616	
<b>Employment / Legal / Financial Assistance</b>			
Resource Center	790 Main St, #618 Weaverville 96093	(530)623-5538	
Nor-Cal Legal Svc	1370 West St Redding 96001	(530)241-3565	
Human Services	51 Industrial Pkwy Weaverville 96093	(530)623-1265	

<b>TULARE COUNTY</b>			
<b>Emergency Housing</b>			
Rescue Mission	322 N.E. 1 <sup>st</sup> Ave Visalia 93292	(559)740-4178	M/W
Shelter of Hope	1413 N Burke St Visalia 93291	(559)734-7921	W/C
Lighthouse	127 W. Kern Ave Tulare 93274	(559)687-8317	W/C
Family Crisis Ctr.	770 N Main St Porterville 93257	(559)781-7462	W/C
Open Gate	511 North "K" St Dinuba 93618	(559)591-1241	F
<b>Transitional Housing</b>			
The PAAR Center	184 W. Belleview Porterville 93257	(559)781-0107	
Family Crisis Ctr.	770 N. Main St Porterville 93257	(559)781-7462	
El Granito	383 W. Date Ave Porterville 93257	(559)784-2788	M/W/C
<b>Food / Clothing Resources</b>			
Emergency Aid	424 N. "N" St Tulare 93274	(559)686-3693	
Open Gate	511 North "K" St Dinuba 93618	(559)591-1241	
Rescue Mission	1413 N Burke St Visalia 93291	(559)734-7921	
Bethlehem Center	1638 N. Dinuba Blvd Visalia 93291	(559)734-1572	
Salvation Army	1501 W. Main St Visalia 93291	(559)733-2784	
<b>Substance Abuse Treatment</b>			
VA Tulare OPC	1050 N. Cherry St Tulare 93274	(559)684-8703	V
Health Services	5957 S. Mooney Blvd Visalia 93277	(559)624-8035	
The PAAR Center	184 W Belleview Porterville 93257	(559)781-0107	M/W



Turning Point Ctr.	1845 S. Court St Visalia 93277	(559)732-5550	
Recovery Svc	320 W. Oak Ave Ste A Visalia 93291	(559)625-2995	
El Granito	383 W. Date Ave Porterville 93257	(559)784-2788	
House of Hope	831 E Houston Visalia 93291	(559)733-8152	
New Vision	1425 E. Walnut Visalia 93292	(559)625-4072	W
New Hope	212 N. Stevenson Visalia 93292	(559)625-0440	W
Pine Rec. Center	120 W. School St Visalia 93291	(559)625-4100	M
Tule River Council	1010 N. Reservation Porterville 93257	(559)781-8797	NA
<b>Employment Assistance</b>			
Tulare-WORKs	458 E. O'Neal Ave Tulare 93274	(800)540-6880	
One-Stop Center	4025 W. Noble Ave #B Visalia 93291	(559)713-5000	
One-Stop Center	1061 W Henderson Porterville 93257	(559)788-1400	
One-Stop Center	115 E Tulare Ave Tulare 93274	(559)684-1987	
One Stop Center	54 N. Main St Porterville 93257	(559)781-1852	
Depart of Rehab	4930 W. Kaweah Ct 100 Visalia 93277	(559)735-3838	
<b>Legal / Financial Assistance</b>			
Cal Legal Svc	208 W. Main St #U-1 Visalia 93291	(559)733-8770	
Emergency Aid	424 N. "N" St Tulare 93274	(559)686-3693	
Social Security	890 W. Morton Ave Porterville 93257	(866)388-8903	
Human Services	5957 S. Mooney Blvd Visalia 93277	(559)624-8110	

TUOLUMNE COUNTY			
<b>Housing / Food / Clothing Resources</b>			
ATCCA	427 N. Hwy 49 Sonora 95370	(209)533-1397	F
Sober Living Homes	120 McCormick Dr Sonora 95370	(209)770-2517	
Food Closet	18580 Cherokee Dr Twain Harte 95383	(209)586-3284	
Interfaith Services	18500 Striker Ct Sonora 95370	(209)532-0905	
<b>Substance Abuse Treatment</b>			
VA Sonora OPC	13663 Mono Way Sonora 95370	(209)588-2600	V
Maynards Recovery	19325 Cherokee Rd Tuolumne 95379	(209)928-3737	M/F
Behavior Health	197 Mono Way Sonora 95370	(209)533-6245	
Public Health	20111 Cedar Rd North Sonora 95370	(209)533-7401	
<b>Employment / Financial Assistance</b>			
Job Connection	19890 Cedar Rd North Sonora 95370	(209)588-1150	
Social Services	20075 Cedar Rd North Sonora 95370	(209)533-5711	

VENTURA COUNTY			
<b>Emergency Housing</b>			
Rescue Mission	234 E. 6th St Oxnard 93031	(805)487-1234	M
Alliance Mission	315 N-A St Oxnard 93030	(805)487-1234	
Lighthouse Shelter	104 N. Hayes Ave. Oxnard 93030	(805)487-1234	W/C
Our Place Shelter	536 E. Thompson Blvd Ventura 93001	(805)652-2151	MH
<b>Transitional Housing</b>			

Rescue Mission	234 E. 6th St Oxnard 93031	(805)487-1234	
Many Mansions	1459 E. Thousand Oaks T. Oaks 91362	(805)497-0344	
RAIN Project	1732 S. Lewis Rd Camarillo 93010	(805)385-1800	
Salvation Army	155 S. Oaks St Ventura 93001	(805)648-4977	W/F
Sunlight of the Spirit	645 W. Guava St Oxnard 93033	(805)403-6801	W
Freedom House	460 S. "F" St Oxnard 93030	(805)483-8343	M
Khepera House	330 N. Ventura Ave Ventura 93001	(805)653-2596	
Ruben's Place	230 Warner St Ventura 93001	(805)760-8900	
Victory Outreach	200 W. Pleasant Valley Oxnard 93033	(805)986-8862	M/W
<b>Food / Clothing Resources</b>			
Salvation Army	155 S. Oak St. Ventura 93001	(805)648-5032	
Calvary Church	358 San Clemente Ventura 93001	(805)3020726	
Lutheran Social Svc	80 E. Hillcrest Dr #101 T. Oaks 91360	(805)497-6207	
Samaritan Center	280 Royal Ave Simi Valley 93065	(805)579-9166	
Salvation Army	622 Wooley Rd Oxnard 93030	(805)483-9235	
<b>Substance Abuse Treatment</b>			
VA Oxnard OPC	2000 Outlet Ctr Dr #225 Oxnard 93033	(805)604-6960	V
Public Health	3147 Loma Vista Rd Ventura 93003	(805)652-6694	
Behavioral Health	1911 Williams Dr Oxnard 93030	(805)981-6830	
Behavioral Health	1227 Los Angeles Simi Valley 93063	(866)998-2243	
Casa de Vida	531 W. Bard Rd Oxnard 93033	(805)486-8401	
Rescue Mission	234 E. 6th St Oxnard 93031-5545	(805)487-1234	M
<b>Employment Assistance</b>			
EDD	635 S. Ventura Rd Oxnard 93030	(805)382-8701	
Job Center	4000 S. Rose Ave Oxnard 93033	(805)986-7300	
Job Center	980 Enchanted Way Simi Valley 93065	(805)955-2282	
Job Center	80 Hillcrest Dr Thousand Oaks 91360	(805)374-9006	
Job Center	4651 Telephone Rd, Ventura 93001	(805)654-3435	
Depart of Rehab	101 Hoden Camp Rd T. Oaks 91360	(805)371-6279	
<b>Legal / Financial Assistance</b>			
Cal-Works	1400 Vanguard Dr. Oxnard 93033	(805)385-9363	
Catholic Charities	303 N. Ventura Ave Ventura 93001	(805)643-4694	
Catholic Charities	402 N. "A" St Oxnard 93030	(805)486-2900	
One Stop Shop	3147 Loma Vista Ventura, 93003	(805)652-6694.	
Social Security	327 N. 5TH St Oxnard 93030	(800)772-1213	
Social Services	4651 Telephone Rd Ventura 93003	(805)658-4100	

YOLO COUNTY			
<b>Emergency Housing</b>			
Grace in Action	P.O. Box 4393 Davis 95617	(530)792-1053	R
STEAC Shelter	1900 East 8 <sup>th</sup> St. Davis 95616	(530)758-8435	
Wayfarer Center	207 4th St Woodland 95776	(530)661-1218	
Walter's House	285 4th St Woodland 95776	(530)662-2699	V
Community Shelter	1111 H St Davis 95616	(530)753-9204	

4 <sup>th</sup> and Hope	4th & Hope Lane Woodland 95776	(530)661-1218	
<b>Transitional Housing</b>			
Wayfarer Center	207 4th St Woodland 95776	(530)406-0844	F
Progress House	15450 County Rd 99 Woodland 95695	(530)668-9627	W/C
<b>Food / Clothing Resources</b>			
Davis Church	412 C St Davis 95616	(530)753-2894	
Food Bank	1244 Fortna Ave Woodland 95776	(530)668-0690	
Salvation Army	130 Court St Woodland 95776	(530)662-6129	
Wayfarer Center	207 Fourth St Woodland 95776	(530)406-0844	
Community Meals	1111 H St Davis 95616	(530)753-9204	
Saint Martin	640 Hawthorne Lane Davis 95616	(530)756-0444	
Christian Center	110 6th St W. Sacramento 95605	(916)372-0200	
Food Closet	509 College St Woodland 95695	(530)662-7020	
Food Not Bombs	P.O. Box 72287 Davis 95617	(530)759-0835	
Cal fresh	25 N. Cottonwood Woodland 95695	(530)661-2750	
<b>Substance Abuse Treatment</b>			
VA Nor-Cal HCS	10535 Hospital Way Mather 95655	(800)382-8387	V
AOD/Mental health	137N. Cottonwood Woodland 95695	(530)666-8645	
<b>Cache Creek Inc</b>	435 Aspen St Woodland 95695	(530)662-5727	M/W
Walters House	285 Fourth St Woodland, 95695	(530)662-2699	
<b>Employment Assistance</b>			
Employment Svc	500A Jefferson West Sac 95605	(916)375-6200	
One Stop Center	25 N. Cottonwood Woodland 95695	(530)661-2750	
Depart of Rehab	1100 Main St #340 Woodland 95695	(530)668-6824	
<b>Legal / Financial Assistance</b>			
Social Services	25 N. Cottonwood Woodland 95695	(530)661-2750	
Social Services	500A Jefferson W. Sacramento 95605	(916)375-6200	
Nor-Cal Legal Svc	619 North St Woodland 95695	(530)662-1065	
Family Center	9586 Mill St Knights Landing 95645	(530)735-1776	R

<b>YUBA COUNTY</b>			
<b>Housing / Food / Clothing Resources</b>			
TC Rescue Mission	940 14th St Marysville 95901	(530)743-8777	M
Salvation Army	410 "J" St Marysville 95901	(530)216-4530	F
<b>Substance Abuse Treatment</b>			
VA Chico OPC	280 Cohasset Rd Chico, 95926	(530)879-5000	V
Mental Health Svc	1965 Live Oak Blvd Yuba City 95991	(530)673-8255	
Salvation Army	410 "J" St Marysville 95901	(530)216-4530	
ACTS	5206 Tulip Rd Marysville 95901	(530)742-7761	
<b>Employment / Legal / Financial Assistance</b>			
One Stop Center	1114 Yuba St Marysville 95901	(530)749-4850	
Freed	508 J Street Marysville 95901	(530)742-4474	
H. D. C.	1468 Sky Harbor Dr Oliverhurst 95961	(530)741-2924	

Rural Legal Help	511 D St/POB 2600 Marysville 95901	(530)742-5191	
Family Law Facility	120 Fifth St Marysville 95901	(530)749-7685	
Senior Legal Ctr.	725 D St Marysville 95901	(530)742-8289	
Human Services	5730 Packard #100 Marysville 95901	(530)749-6311	

## **Supplement to the Guidebook for California Incarcerated Veterans**

This supplement to the Guidebook for California Incarcerated Veterans was prepared for veterans incarcerated in California who do not have a scheduled release date yet, or are incarcerated without the possibility of parole. This supplement primarily addresses disability compensation - what it is, the requirements you must meet to be eligible for it, how it might help you both now and after release, and suggestions for preparing and supporting a claim for it.

For incarcerated veterans who meet the requirements, disability compensation is often the best Department of Veterans Affairs (VA) benefit available. Obtaining VA disability compensation starts with a VA disability rating, which is also the gateway to other benefits, both federal and state. For those who do not presently meet the requirements, this guide has suggestions that might help you become eligible.

Most of those other benefits are not available to you until you are released, but having some income while incarcerated, and getting quicker access to post-release benefits are good reasons to consider applying while incarcerated. This contains information that may be useful to all incarcerated veterans, but, in general, it does not address benefits veterans cannot receive or use while incarcerated.

Disability compensation is a tax-free monetary benefit paid to veterans with disabilities resulting from or aggravated by disease or injury during active military service. Compensation may also be paid for post-service disabilities related to or secondary to disabilities occurring in service and for disabilities presumed to be related to military service, even though they may arise after service.

If you are granted disability compensation, your disability compensation will be reduced while incarcerated, but even a reduced benefit will help you, and if you have dependents you may be able to send them part of your compensation. Having a disability rating while incarcerated will also speed up receiving disability benefits at the non-incarcerated rate and obtaining additional benefits faster after release.

The 2013 edition the Guidebook for California Incarcerated Veterans was the most recent edition of that guidebook at the time this supplement was created.

## **About the Editor**

I served on active duty for thirty years. Among other things, I had been a contingency planner who knows it's often hard to identify what's missing. As a result of my active duty I have a 100% disability rating from the VA. I am also a former Veterans Service Representative working at the VA Veterans Benefits Administration.

I recently learned someone I had served with on active duty years ago was both incarcerated and unaware he may have been able to collect some disability compensation all the while, but he was unaware of the benefit. I am trying to inform incarcerated veterans that they may be eligible for some VA benefits. Some things in law, regulation, and policy have likely changed since I left the VA, but I trust this will be useful to many.

***Anything in italics is the editor's paraphrase, explanation, opinion, or suggestion.*** In my opinion the Guidebook for California Incarcerated Veterans is missing three things-information that might help former service members determine their veteran status (especially former Reserve/Guard members who did not have active duty); information for veterans with "bad paper;" and a dedicated section that provides detailed guidance to disability compensation solely for veterans who do not have a scheduled release date or are incarcerated without the possibility of parole. This Supplement is intended to address those three shortcomings.

The information provided here may help improve your situation while incarcerated. Filing a disability claim while incarcerated may reduce your wait time for receiving additional benefits after release. Even if you do not currently believe you have a disability caused by something that happened during your service, this Supplement may still have useful information for you.

The Guidebook for California Incarcerated Veterans addresses many more benefits, including ones provided by the California Department of Veterans Affairs (CDVA). Many benefits from VA or CDVA, some of which you may be eligible for now, many more you may be eligible for after release, are based on VA disability ratings. I suggest you read this Supplement, see whether you meet the requirements for disability compensation and, if you think you meet them, try to obtain a VA disability rating while incarcerated.

This supplement is a completely independent publication not endorsed by the U.S. Department of Veterans Affairs or the CDVA. You may find much is "over explained," but I'd rather give too much information than too little.

MPA, CWO4, retired

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## Introduction

The Guidebook for California Incarcerated Veterans was developed by the US Department of Veterans Affairs (VA) and the California Department of Veterans Affairs (CDVA) for veterans confined in a state or federal correctional facility in California. Most of that guidebook applies to veterans who have a scheduled release date or were recently released. This supplement was created for veterans who don't have a release date because you may be eligible for benefits now.

Eligibility for and access to VA benefits are often misunderstood or completely unknown by incarcerated veterans. Many incarcerated veterans may be eligible for VA benefits for themselves while incarcerated. Whether you were drafted or volunteered, you may have earned benefits by your service.

This addresses requirements for disability compensation in order- veteran status, the definition of disability, determining whether you are prohibited from receiving monetary benefits, how to submit and support a claim, and copies of many of the forms you may need.

Efforts have been made to accommodate veterans who do not have access to the internet, computers, or phones by including such things as mailing addresses and suggestions that you request hard copies of records that might otherwise be sent on CD. Some internet addresses are included so if you have someone who can access the internet they can do things such as obtain forms for you. Many things that are not useful to you have been eliminated, such as the hours of operation of county veterans offices.

*Note: It's not legal to have someone else "pass themselves off as you" by creating a user name and password to access websites on your behalf.*

*However: You can have an individual represent you to the VA by completing a VA Form 21-22a, which grants a limited power of attorney to that individual, signing it yourself, having the individual sign it, and submitting it to the VA. There are limitations: the representative cannot be paid, and they can only represent you in one claim, so when that claim is finalized that power of attorney expires. Only VA Forms 21-22, which allows Veteran Service Organizations to represent you, and 21-22a are recognized by the VA as granting power of attorney before the VA.*

*The VA also has a Form 21-0845 that authorizes the VA to share information about your claim with someone else, but they do not represent you, and they cannot make decisions on your behalf. There will be more about the 21-22, 21-22a, and 21-0845 forms later.*

*With very few exceptions (such as being eligible to receive a benefit that was earned by another veteran) veteran status is the first requirement. Veteran status has more variations than most veterans imagine, and, because some former service members may have become veterans without even knowing it, I suggest you begin by checking your own status and, perhaps, the options available to you if there was a problem during your time in service.*



## Seeking VA Disability Compensation

### The First Question: Are You a Veteran?

The first requirement is veteran status. There are many paths to veteran status, so I suggest you begin by checking the requirements and considering your own situation.

The term “veteran” means a person who served in the active military, naval, or air service, and who was discharged or released therefrom under conditions other than dishonorable. (Title 38 United States Code (USC) Section 101(2).

*If you were discharged with a Dishonorable Discharge you are not a veteran and there is little chance you are eligible for any benefit from the VA. Skip ahead to the “Changing Your COD” (Character of Discharge) paragraph on page 120 for your options.*

*The definition of veteran includes having a discharge or release “under conditions other than dishonorable.” Even if your actual Character Of Discharge (COD) was not Dishonorable, per Title 38 Code of Federal Regulations (CFR) Section 3.12(d), if you were discharged for any of the following reasons your discharge is considered dishonorable and you are not a veteran:*

1. Acceptance of an undesirable discharge to escape trial by general court-martial.
2. Mutiny or spying.
3. An offense involving moral turpitude. This includes, generally, conviction of a felony.
4. Willful and persistent misconduct.
5. Homosexual acts involving aggravating circumstances or other factors affecting the performance of duty. *(The circumstances that led to such a discharge really matter in this situation. See the complete Title 38 CFR § 3.12(d)(5) on page 143 for further information.)*

*“Conviction of a felony” here applies only if a felony conviction was the reason you were discharged. Conviction of a felony after discharge does not mean you aren’t a veteran. Skip ahead to the “Changing Your COD” (Character of Discharge) on page 120 for your options.*

Everyone else, continue.

**Table 1: “Active military, naval, or air service” (Title 38 USC § 101(24))**

The term “active military , naval, or air service” includes—

- (A) active duty;
- (B) any period of active duty for training during which the individual concerned was disabled or died from a disease or injury incurred or aggravated in line of duty; and
- (C) any period of inactive duty training during which the individual concerned was disabled or died—
  - (i) from an injury incurred or aggravated in line of duty; or
  - (ii) from an acute myocardial infarction, a cardiac arrest, or a cerebrovascular accident occurring during such training.

**Table 2: A somewhat simpler paraphrase of Table 1**

1. Active duty (for which you should have received a DD-214 that shows something in the “Net Active Duty this Period” of the “Record of Service” block), and/or
2. Active duty for training (ACDUTRA or ADUTRA) if disabled due to a disease or injury in the line of duty during ACDUTRA, or if you aggravated a pre-existing disability in the line of duty during ACDUTRA, and/or
3. Inactive duty for training (INACDUTRA or INADUTRA) (such as a reserve weekend drill) if disabled due to an injury in the line of duty during INACDUTRA, or if you aggravated a pre-existing disability in the line of duty during INACDUTRA, and/or
4. Inactive duty for training if the service member suffered acute myocardial infarction (heart attack), a cardiac arrest, or a cerebrovascular accident (stroke).

**For Former Army National Guard of the United States, Air National Guard of the United States, and Reservists:** *The situations in Table 1, sections (B) and (C), and Table 2, sections 2, 3, and 4 are circumstances where Army National Guard of the United States, Air National Guard of the United States, and Reserve members may have acquired “active military, naval, or air service” if they have a disability caused by a disease or injury incurred or aggravated in the line of duty. In other words, they may have become veterans without even being aware of it.*

**Federal Definition of a Disability:** Both Title 38 USC § 101(24)(B) and (C) include “was disabled” when defining “Active military, naval, or air service.” The federal definition of disability is found at Title 42 USC § 12102(1): “The term “disability” means, with respect to an individual, a physical or mental impairment that substantially limits one or more major life activities of such individual . . . “. “Major life activities” is defined in Title 42 USC § 12102(2): “[M]ajor life activities include, but are not limited to, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working.”

*In general, impairments that have (or had) an actual or expected duration of six months or less are not considered disabilities. If, for instance, you broke your ankle on active duty, ACDUTRA, or INACTUTRA and it healed completely you don’t meet the “was disabled” test because it healed*

*or could be expected to have healed within six months. In any event, without a current disability you aren't eligible for VA disability compensation.*

### **Possible Paths to Veteran Status**

Now look over the following situations to see which one(s) describe your situation.

**1. Former Active Duty Service Member:** *If you served in the active military, naval, or air service, and you were not discharged with a Dishonorable Discharge, or discharged for one of the five dishonorable reasons on page 110, you are a veteran. Skip ahead to the "For All Former Army National Guard of the United States, Air National Guard of the United States, and Reservists" paragraph on page 113.*

**2. Former Army National Guard of the United States, Air National Guard of the United States, and Reserves with Some Active Duty:** *Members of the Army National Guard of the United States, Air National Guard of the United States, and Reserves often had brief periods of active duty for emergencies, and/or long periods of active duty in any of our wars. In those circumstances they should have received DD-214 discharge documents for those periods of activation with that period of time showing in the "Net Active Duty this Period" in the "Record of Service" block of the form. If you have a DD-214 that shows active duty time and you were not discharged with a Dishonorable Discharge or for one of the five dishonorable reasons on page 110 you are a veteran. Skip ahead to the "For All Former Army National Guard of the United States, Air National Guard of the United States, and Reservists" paragraph on page 113.*

**3. Former Army National Guard of the United States and Air National Guard of the United States who had Active Duty for Training (ACDUTRA) but no Active Duty:** *This can be a bit complicated. First, you must have been ordered to training under Title 32 USC § 316, 502, 503, 504, or 505 for that service to have been considered ACDUTRA. Please check your own paperwork to see what authority was referenced. Next, if you meet these three criteria:*

- 1. you currently have a disability that meets the Title 42 USC § 12102(1) definition on page 111, and*
- 2. that disability was caused by a disease or injury while on ACDUTRA, or by a disease or injury that aggravated a pre-existing disability while on ACDUTRA, and*
- 3. the way you acquired that disability was in the line of duty,*

*then you may have acquired "active military, naval, or air service" under Title 38 USC § 101(24), thereby becoming a veteran as defined in Title 38 USC § 101(2), and you may be eligible for VA disability compensation.*

***Without active duty, having a disability that meets all three of the criteria above is one way you might obtain veteran status and possibly be eligible for VA veteran benefits. Skip ahead to the Checklist for Eligibility for Disability Compensation section on page 114.***

**4. Former Army National Guard of the United States and Air National Guard of the United States who had Inactive Duty for Training (INACDUTRA) but no Active Duty:** *If you meet these three criteria:*

1. *you currently have a disability that meets the Title 42 USC § 12102(1) definition on page 111, and*
2. *that disability was caused by an injury while on INACDUTRA, or by an injury that aggravated a pre-existing disability while on INACDUTRA, or an acute myocardial infarction, a cardiac arrest, or a cerebrovascular accident occurring during INACDUTRA, and*
3. *the way you acquired that disability was in the line of duty,*

*then you may have acquired “active military, naval, or air service” under Title 38 USC § 101(24), thereby becoming a veteran as defined in Title 38 USC § 101(2), and you may be eligible for VA disability compensation.*

***Without active duty, having a disability that meets all three of the criteria above is one way you might obtain veteran status and possible VA veteran benefits. Skip ahead to the “For All Former Army National Guard of the United States, Air National Guard of the United States, and Reservists” paragraph at the bottom of this page.***

**5. Former Reservists with no Active Duty:** *If Table 1, section (B) or (C), or Table 2, situation 2, 3, or 4 describes your situation and you want veteran status you can (and probably should) provide supplemental information to support your claim. You must meet these three criteria:*

1. *you currently have a disability that meets the Title 42 USC § 12102(1) definition on page 111, and*
2. *that disability was caused by a disease or injury while on ACDUTRA, or by a disease or injury that aggravated a pre-existing disability while on ACDUTRA, or by an injury while on INACDUTRA, or by an injury that aggravated a pre-existing disability while on INACDUTRA, or an acute myocardial infarction, a cardiac arrest, or a cerebrovascular accident occurring during INACDUTRA, and*
3. *the way you acquired that disability must have been in the line of duty,*

*then you may have acquired “active military, naval, or air service” under Title 38 USC § 101(24), thereby becoming a veteran as defined in Title 38 USC § 101(2), and you may be eligible for VA disability compensation.*

***Without active duty, having a disability that meets all three of the criteria above is one way you might obtain veteran status and possible VA veteran benefits. Skip ahead to the Checklist for Eligibility for Disability Compensation section on page 114.***

**For All Former Army National Guard of the United States, Air National Guard of the United States, and Reservists Who may have a Disability from ACDUTRA and/or INACDUTRA:** *If you believe you meet all three criteria of any or all of the three previous situations, I suggest you submit a claim for disability compensation on VA Form 21-526EZ. On VA Form 21-4138, which is sort of the “blank page” of VA forms, include the approximate date, circumstances, any evidence of injury or disease in your possession such as an accident report or mishap report (MISREP) message, why you believe the disability was in the line of duty, and any evidence you have supporting you having been on active duty for training or inactive duty for training, such as orders*

*to ACDUTRA, an ACDUTRA DD-214, or a weekend drill schedule. When the VA receives your claim, if they note any reason to doubt whether your original injury or disease was in the line of duty, the VA will first look to see if your service already did a line-of-duty determination. If your service did not, the VA will do a line-of-duty determination. If you are concerned about the circumstances of your disease or injury, you can explain the circumstances on a VA Form 21-4138 and include that with your claim. A “buddy statement” by someone familiar with the circumstances of how you became disabled may also be helpful. As the VA probably cannot call you, make sure anyone providing “buddy statements” provides their contact information on their statements, including unit assignment, service number, address, phone number, etc. If you do not have active duty, but the VA determines you have a disability caused by or aggravated by a disease or injury that happened in the line of duty on ACDUTRA or by an injury while on INACDUTRA, then you have had active duty in the military, naval, or air service, you are a veteran, and VA processing of your claim for veteran benefits will continue.*

**Former Members of the California Army National Guard and/or California Air National Guard:** *Some former members of the California Army National Guard, California Air National Guard, and California State Military Reserve (not Army National Guard of the United States or Air National Guard of the United States) are unaware that those are state forces. Serving in them does not establish veteran status for VA purposes. However- if you were ever ordered to active duty by federal authority and received a DD-214 that shows “Net Active Duty this Period” in the “Record of Service” block you have active duty and are a veteran.*

#### **Checklist for Eligibility for Disability Compensation:**

- 1. You must meet the Title 38 USC § 101(2) definition of veteran on page 110, and*
- 2. You must meet one (or more) of the definitions of “active military, naval, or air service” from Title 38 USC § 101(24) on page 111, and*
- 3. You must currently have one or more disabilities that meet the Title 42 USC § 12102(1) definition on page 111, and*
- 4. Your disability or disabilities must be connected to an injury or disease that happened on active duty or ACDUTRA, or connected to an injury, acute myocardial infarction, cardiac arrest, or cerebrovascular accident that happened on INACDUTRA, and*
- 5. The cause(s) of your disability or disabilities must have been in the line of duty.*

*Note: The VA will determine if you and your circumstances meet these criteria, but only if they receive a claim for some VA benefit. They won’t do a “stand alone” determination of whether you have veteran status or not.*

**Obtaining Copies of Your Medical and Service Records:** Your service and/or health records may be at the National Archives and Records Administration (NARA). You can request records that NARA may have by submitting a SF-180, Request Pertaining to Military Records. Certain identifying information is necessary to determine the location of an individual's record of military service, especially your service number(s) because most NARA records are filed according to service numbers. Please try to answer each item on the SF 180. If you do not have and cannot obtain the information for an item, show "NA." Include as much of the requested information as

you can. Incomplete information may delay response time. To determine where to mail this request see Page 2 of the SF-180 for record locations and addresses. If you don't have access to a computer with a CD drive, or are not allowed to receive a CD, request hard copies.

*Suggestion: If you mail a request for your records and file a claim with the VA at the same time your records may already be pulled to be copied for you before someone looks for them for your claim. That may delay your claim, so I suggest you do not request your own records until you have reason to believe the VA has your records.*

**Obtaining Copies of Your VA Records:** The Department of Veterans Affairs is divided into three administrations: Veterans Health Administration (VHA), Veteran's Benefits Administration (VBA) and National Cemetery Administration. You can request copies of your VA records with a VA Form 70-3288, Request for and Consent to Release of Information from Claimant's Records. It's used to get records relevant to your claim from VA facilities (regional offices, medical centers, outpatient clinics, and vet centers). Request a fee waiver under Title 38 CFR Section 1.526 (h)(2), which requires the VA to provide a veteran with one set of records free of charge. If you don't have access to a computer with a CD drive, or are not allowed to receive a CD, request hard copies.

**The Veterans Benefits Administration offices in California are:**

Los Angeles Regional Office  
11000 Wilshire Blvd  
Los Angeles, CA 90024

Oakland Regional Office  
1301 Clay Street, Room 1300 North  
Oakland, CA 94612

San Diego Regional Office  
8810 Río San Diego Drive  
San Diego, CA 92108

**The Veterans Health Administration medical centers in California are:**

VA Central California Health Care System  
2615 E. Clinton Avenue  
Fresno, CA 93703

Sacramento VA Medical Center  
10535 Hospital Way  
Mather, CA 95655

VA Loma Linda Healthcare System  
11201 Benton Street  
Loma Linda, CA 92357

VA Palo Alto Health Care System  
3801 Miranda Avenue  
Palo Alto, CA 94304-1290

VA Long Beach Healthcare System  
5901 East 7th Street  
Long Beach, CA 90822

VA San Diego Healthcare System  
3350 La Jolla Village Dr.  
San Diego, CA 92161

West Los Angeles VA Medical Center  
11301 Wilshire Blvd  
Los Angeles, CA 90073

San Francisco VA Health Care System  
4150 Clement Street  
San Francisco, CA 94121

**The VA Vet Centers in California are:**

Vet Centers hold their own records, so requests for their records must be addressed to the individual Vet Center. The VA website and Guidebook for California Incarcerated Veterans refer the reader to the VA website, so the addresses for the California Vet Centers are provided for you here.

**Bakersfield:**

Bakersfield Vet Center  
1110 Golden State Ave.  
Bakersfield, CA 93301

**Concord:**

Concord Vet Center  
1333 Willow Pass Road, Suite 106  
Concord, CA 94520-7931

**Bonita:**

Chula Vista Vet Center  
180 Otay Lakes Road, Suite 108  
Bonita, CA 91902-2439

**Corona:**

Corona Vet Center  
800 Magnolia Avenue Suite 110  
Corona, CA 92879

**Capitola:**

Santa Cruz County Vet Center  
1350 41st Ave, Suite 104  
Capitola, CA 95010

**Culver City:**

West Los Angeles Vet Center  
5730 Uplander Way Suite 100  
Culver City, CA 90230

**Chatsworth:**

Chatsworth Vet Center  
20946 Devonshire St, Suite 101  
Chatsworth, CA 91311

**Eureka:**

Eureka Vet Center  
2830 G Street, Suite A  
Eureka, CA 95501

**Chico:**

Chico Vet Center  
250 Cohasset Road, Suite 40  
Chico, CA 95926

**Fairfield:**

RCS Pacific District 5 District Office  
420 Executive Court North Suite A  
Fairfield, CA 94534

**Citrus Heights:**

Citrus Heights Vet Center  
River City Bank Building  
5650 Sunrise Blvd., Suite 150  
Citrus Heights, CA 95610

**Fresno:**

Fresno Vet Center  
1320 E. Shaw Ave, Suite 125  
Fresno, CA 93710

**Colton:**

San Bernardino Vet Center  
1325 E. Cooley Drive, Suite 101  
Colton, CA 92324

**Garden Grove:**

North Orange County Vet Center  
12453 Lewis St. Suite 101  
Garden Grove, CA 92840

**Commerce:**

East Los Angeles Vet Center  
5400 E. Olympic Blvd. Suite 140  
Commerce, CA 90022

**Gardena:**

Los Angeles Vet Center  
1045 W. Redondo Beach Blvd. Suite 150  
Gardena, CA 90247



**Menlo Park:**

Peninsula Vet Center  
345 Middlefield Road, Building 1  
Menlo Park, CA 94025

**Mission Viejo:**

South Orange County Vet Center  
26431 Crown Valley Parkway, Suite 100  
Mission Viejo, CA 92691

**Modesto:**

Modesto Vet Center  
1219 N. Carpenter Rd., Suite 11-12  
Modesto, CA 95351

**Oakland:**

Oakland Vet Center  
7700 Edgewater Drive, Suite 125  
Oakland, CA 94621

**Palmdale:**

Antelope Valley Vet Center  
38925 Trade Center Drive, Suites I/J  
Palmdale, CA 93551

**Rohnert Park:**

North Bay Vet Center  
6010 Commerce Blvd., Ste. 145  
Rohnert Park, CA 94928

**Sacramento:**

Sacramento Vet Center  
1111 Howe Avenue Suite #390  
Sacramento, CA 95825

**San Diego:**

San Diego Vet Center  
2790 Truxtun Road, Suite 130  
San Diego, CA 92106

**San Francisco:**

San Francisco Vet Center  
505 Polk Street  
San Francisco, CA 94102

**San Jose:**

San Jose Vet Center  
80 Great Oaks Blvd.  
San Jose, CA 95119

**San Luis Obispo:**

San Luis Obispo Vet Center  
1070 Southwood Drive  
San Luis Obispo, CA 93401

**San Marcos:**

San Marcos Vet Center  
One Civic Center Dr., Suite 150  
San Marcos, CA 92069

**Temecula:**

Temecula Vet Center  
40935 County Center Drive, Suite A/B  
Temecula, CA 92591

**Ventura:**

Ventura Vet Center  
790 E. Santa Clara St. Suite 100  
Ventura, CA 93001

**Victorville:**

High Desert Vet Center  
15095 Amargosa Rd, Suite 107  
Victorville, CA 92394

## The Second Question: Are You Barred from Receiving VA Benefits by Your Character of Discharge (COD)?

Even if you are a veteran, the character(s) of your discharge(s) may limit or eliminate eligibility to receive VA benefits.

### Character Of Discharge (COD) Terms and Definitions

As in the “Are You a Veteran?” section above, there are probably more possibilities than you imagine, so I’ll begin with some terms and definitions.

**Back-to-Back Discharges:** Back-to-Back discharges are ones where you complete one Period of Service (POS) and re-enlist the same day or the very next day. If you had back-to-back discharges you should have received a DD-214 for each POS. Each DD-214 should have a Character of Service identified (honorable, general, etc.) for that POS.

**Conditional Discharges:** Conditional discharges happen when a service member asks to re-enlist before his or her obligated service (the amount of time they “signed up for”) is up and his or her service allows the member to re-enlist early. You must be discharged before you can re-enlist, so you are given a “conditional discharge” based upon you immediately re-enlisting. In this case you don’t get a DD-214 for that first POS. That means that your service department will not have made a Character of Discharge determination for the POS that ended early.

**Extensions:** If you had extended your obligated service, and then were discharged with anything other than an Honorable or General Under Honorable Conditions discharge, the VA will review your records. If you would have had an Honorable discharge when your original POS would have ended you have eligibility for VA benefits based on that POS’s COD. If you would have had a General Under Honorable Conditions discharge when your original POS would have ended you have eligibility for VA benefits except the GI Bill based on that POS’s COD. If, however, your “misbehavior” occurred during your initial obligated service you will need a favorable VA Character of Service Determination (explained below) or a COD upgrade to obtain benefits.

**Uncharacterized separations:** *These three categories of administrative separation do not require characterization of service by the military department concerned. In other words, they are not honorable, general, other-than-honorable, or dishonorable. If the VA receives a claim for benefits from anyone who has any of these three types of separations the conditions of discharge will be determined by the VA as follows:*

- (1) Entry level separation. *Separations of this type are considered to be under conditions other than dishonorable, but all the elements of the Checklist for Eligibility for Disability Compensation on page 114 must still be met.*
- (2) Void enlistment or induction. *Enlistments are void when the enlistment contract was in some way illegal. The VA will determine whether the separation was under conditions other than dishonorable.*

(3) Dropped from the rolls. *The VA will determine whether separation was under conditions other than dishonorable.*

**Vietnam-era Clemency Discharges:** *For Vietnam-era service members who have either an Undesirable Discharge or a punitive discharge (Dishonorable Discharge, Bad Conduct Discharge, or an officer who was dismissed), and who have received a Clemency Discharge: a Clemency Discharge functions the same as the other uncharacterized discharges- it's neither honorable nor other-than-honorable. The VA will review the original COD and your service record, determine whether it was under other-than-honorable conditions or other-than-dishonorable conditions, and make a Character of Service Determination (two paragraphs below on this page). You may want to submit a statement on VA Form 21-4138 to explain what led to your original COD.*

**Changing Your COD (Discharge “Upgrade”):** Changing your COD can only be done by your service’s Discharge Review Board or Board for Correction of Military Records. If your discharge was less than fifteen years ago and you seek an upgrade use DD Form 293, Application for the Review of Discharge or Dismissal from the Armed Forces of the United States. If your discharge was more than fifteen years ago and you seek an upgrade use DD Form 149, Application for Correction of Military Record Under the Provisions of Title 10, U.S. Code, Section 1552. The address for each service is on the back of the forms. There is currently no such thing as an automatic review or automatic upgrade.

**Character of Service Determination (CSD):** In certain circumstances the VA can make an administrative decision that a discharge COD that is other-than-honorable (Other Than Honorable discharges and Bad Conduct Discharges) is other-than-dishonorable. Before discussing what a CSD is and how it works I want to list the situations that prevent the VA from doing a CSD. If your situation is among ten of the following twelve below, the VA cannot do a CSD for you.

**Table 3: Ten Situations where the VA Cannot do a CSD**

- Discharged by General Court Martial
- Conscientious objector who refused to perform military duty or refused to wear the uniform or otherwise to comply with lawful orders of competent military authority
- Desertion
- Resignation of an officer for the good of the service
- An alien who requested release from service during a period of hostilities
- Acceptance of an Other-Than-Honorable discharge in lieu of trial by General Court Martial
- Mutiny
- Spying
- “Offense of moral turpitude” (usually involving a felony)
- Homosexual acts involving aggravating circumstances or affecting the performance of duty

**Table 4: Two Situations where the VA Can do a CSD**

- AWOL for a continuous period of 180 days or more without good reason. *(In this situation the VA is allowed to decide whether you had good reason based on the evidence of record and your input if you choose to request a CSD. Provide your request for a CSD and why you believe you had a good reason for being AWOL on VA Form 21-4138. The VA will not accept a stand-alone request for CSDs, so the 21-4138 must accompany a claim for some VA benefit).*
- Willful and persistent misconduct. *(In this situation the VA is allowed to decide whether your misconduct was both willful and persistent based on evidence of record and your input. Provide your request for a CSD and your explanation on VA Form 21-4138. The VA will not accept a stand-alone request for CSDs, so the 21-4138 must accompany a claim for some VA benefit).*

Eligibility for VA benefits requires a discharge that is “other than dishonorable.” What a VA CSD may be able to do for you if your discharge is not Honorable, General Under Honorable Conditions, Dishonorable, or due to one of ten of the twelve situations in Table 3 is determine that your discharge was under conditions *other than dishonorable* based on all evidence available to the VA.

Evidence can include any statement you submit and/or “buddy statements,” and whether you believe disabilities (particularly Post Traumatic Stress Disorder (PTSD), Traumatic Brain Injury (TBI), Military Sexual Trauma (MST) due to sexual assault or sexual harassment, or any other mental disorder) may have affected your COD. A VA CSD in your favor does not change your COD, but if it’s in your favor you may be better able to make your case to your own service for a COD upgrade.

**An Initial VA CSD Can:**

- (1) decide an Other-Than-Honorable discharge is dishonorable, meaning any bar to VA benefits remains in place, or*
- (2) decide that your circumstances, or federal regulations, do not allow the VA to make a CSD, or*
- (3) the VA may make a favorable CSD (“honorable for VA purposes” in VA lingo).*

**If the VA Has Made a CSD for You Previously:** *If the VA made a CSD in some claim you submitted previously, and they decided your COD remained other-than-honorable, then, if you make a new request for CSD and supply new evidence, “buddy statements,” etc., the VA can:*

- 1. make a favorable decision based on new evidence you provide, or*

2. *if an other-than-honorable discharge was based on AWOL periods of a continuous period of 180 days (see Table 3 above), the VA may be able to make a new CSD based on evidence you provide and the change in law in Title 38 CFR § 3.12(c)(6), or*
3. *the VA can “Confirm and Continue” (“C&C” in VA lingo) the previous decision, meaning the previous CSD remains in effect.*

**Important note on CSDs:** *There must be a claim for some benefit managed by the VA before the VA will do a review of veteran status, bars to benefits, or make a CSD on other-than-honorable discharges. The VA will not accept a stand-alone request for CSDs.*

**Discharge Upgrade Request, VA CSD Request, or Both?:** You can request a discharge upgrade without seeking a VA CSD. If your discharge was less than fifteen years ago and you seek an upgrade use DD Form 293, Application for the Review of Discharge or Dismissal from the Armed Forces of the United States. If your discharge was more than fifteen years ago and you seek an upgrade use DD Form 149, Application for Correction of Military Record Under the Provisions of Title 10, U.S. Code, Section 1552.

*You can also request both a discharge upgrade and a VA CSD at the same time, or request either one while waiting for a decision on the other.*

*Suggestion: If you have reason to believe you have Post Traumatic Stress Disorder (PTSD); a Traumatic Brain Injury (TBI); Military Sexual Trauma (MST) due to sexual assault, sexual harassment, or personal assault, or other mental disorder; you may want to submit a claim to the VA for disability compensation on VA Form 21-526EZ, along with VA Form 21-0781 (for PTSD) and/or VA Form 21-0781a (for Personal Assault, including Military Sexual Trauma (MST)) and a request for a VA CSD on VA Form 21-4138. Then, if the VA makes a CSD in your favor, and, if a VA examination finds PTSD, TBI, MST, or some other mental disorder, you may be able to make a better case for yourself when requesting a discharge upgrade.*

## **Ten COD Situations, Their Impacts on VA Benefits, and Options**

**(1) One POS Ending with an Honorable Discharge:** If you had just one POS, with or without an extension, and it ended with an Honorable discharge there is no bar to any benefit managed by the VA to which you are otherwise entitled. This is an administrative discharge. Skip ahead to the “The Third Question: Are There Special Issues You Should Consider?” section on page 127.

**(2) One POS Ending with a General Under Honorable Conditions Discharge:** If you had just one POS and it ended with a General or General Under Honorable Conditions discharge you are not eligible for GI Bill education benefits. You are eligible for any other benefit managed by the VA to which you are otherwise entitled. This is an administrative discharge. If you extended your initial obligated service, and the VA determines you would have received an Honorable discharge when your initial POS ended and your “misbehavior” occurred during your extension, you will be eligible for GI Bill education benefits based on the period of Honorable service. Skip ahead to the “The Third Question: Are There Special Issues You Should Consider?” section on page 127.

**(3) One POS Ending with an Other-Than-Honorable Discharge:** This is the most severe type of administrative discharge. Variations include Other-Than-Honorable, General Under Other-Than-Honorable Conditions, and Undesirable discharges. You still have options, though. If you extended your initial obligated service, and the VA makes a CSD that you would have received an Honorable discharge when your initial POS ended and your “misbehavior” occurred during your extension, you will be eligible for GI Bill education benefits based on the period of Honorable service. If you extended your initial obligated service, and the VA determines you would have received a General Under Honorable Conditions discharge when your initial POS ended and your “misbehavior” occurred during your extension, you will not be eligible for GI Bill education benefits, but that is the only benefit “lost.” You can also request an upgrade to your COD if you wish.

**(4) One POS Ending with a Bad Conduct Discharge Issued by Special Court Martial:** This is a punitive discharge. If you had just one POS and it ended with a Bad Conduct Discharge (BCD) issued by a Special Court Martial you are eligible for a VA CSD. *Suggestion: Request a CSD and explain “your side of the story” on a 21-4138. The VA will not accept a stand-alone request for CSDs, so the 21-4138 must accompany a claim for some VA benefit.* Skip ahead to the “The Third Question: Are There Special Issues You Should Consider?” section on page 127. There may be information there that may help you “make your case” to the VA for a favorable CSD.

**(5) One POS Ending with a Bad Conduct Discharge Issued by General Court Martial:** This is a punitive discharge. If you have just one POS and it ended with a BCD issued by a General Court Martial you are not eligible for a VA CSD (it’s barred by federal law in the statutory bar list in Table 3). If you have just one POS and a BCD issued by General Court Martial you are a veteran, but the only way to become eligible for VA benefits is through a discharge upgrade. Skip ahead to the “The Third Question: Are There Special Issues You Should Consider?” section on page 127. There may be information there that may help you “make your case” to your service department for a favorable discharge “upgrade.”

**(6) One POS Ending with a Dishonorable Discharge:** This is a punitive discharge. If you had just one POS and it ended with a Dishonorable Discharge (which can only be issued by a General Court Martial) or for one of the five dishonorable reasons on page 110, then, per Title 38 USC § 101(2), you are not a veteran. You cannot receive any benefits from the VA with the possible exception of some that may have been earned by some veteran you’re related to. Those are too uncommon and too complicated to cover here. The only way you might gain veteran status and become eligible for VA benefits is through a discharge upgrade.

**(7) More than One POS, All CODs were Honorable:** If you had more than one POS and all ended with Honorable discharges there is no bar to any benefit managed by the VA to which you are otherwise entitled.

**(8) More than One POS, At Least One COD was Honorable:** If you had more than one POS and at least one ended with an Honorable discharge there is no bar to any benefit managed by the VA to which you are otherwise entitled, even if one of your discharges was Other-Than-Honorable or a Bad Conduct Discharge (BCD) with one important exception: If you have any disability that

was caused by an injury or disease that happened during a POS for which you received anything other than an Honorable or General Under Honorable Conditions discharge you may be barred from receiving disability compensation for that disability. Even here you're not necessarily out of options because you can still request a VA CSD for the POS that didn't end with an Honorable or General Under Honorable Conditions discharge unless you were discharged for one of the ten bars listed in Table 3 for which the VA cannot do a CSD, or for one of the five situations in Table 5 below, which are always considered dishonorable.

If you have a disability that was caused by an injury or disease that happened during a POS for which you received an Honorable or General Under Honorable Conditions discharge, got out (didn't have back-to-back or conditional discharges), recovered well enough to re-enlist, then became disabled after that POS ended you are eligible for disability compensation without a VA CSD because you completed the POS during which you were injured or ill with an Honorable or General Under Honorable Conditions discharge.

**(9) More than One POS, Best COD was General Under Honorable Conditions:** If you had more than one POS and the best discharge you received was a General Under Honorable Conditions you are not eligible for GI Bill benefits. But you are eligible for any other benefit to which you are otherwise entitled with one important exception: if you have any disability that was caused by an injury or illness that happened during a POS for which you received anything other than an Honorable or General Under Honorable Conditions discharge you may be barred from receiving disability compensation for that disability. Even here you're not necessarily out of options because you can still request a VA CSD for the POS that didn't end with an Honorable or General Under Honorable Conditions discharge unless you were discharged for one of the ten bars listed in Table 3 for which the VA cannot do a CSD, or for one of the five situations in Table 5 on page 125, which are always considered dishonorable.

If you have a conditional discharge, for which you did not receive a DD-214, then have a final discharge that was anything other than an Honorable or General Under Honorable Conditions discharge, the VA will review your records. If you would have had an Honorable discharge when your original POS would have ended you have eligibility for VA benefits based on that POS's COD. If you would have had a General Under Honorable Conditions discharge when your original POS would have ended you have eligibility for VA benefits except GI Bill based on that POS's COD. If, however, your "misbehavior" occurred during your initial obligated service you will need a favorable VA CSD and/or a COD upgrade to obtain benefits.

**(10) More than One POS, Best COD was Other Than Honorable:** Very few veterans could have more than one POS and have received an OTH discharge (Other Than Honorable, General Under Other Than Honorable Conditions, or Undesirable) as their best one, but it is possible. See VA Character of Service Determinations (CSD) section beginning on page 120 to see whether the VA can do a CSD for you. You can also request a discharge upgrade.

## Other Bars to VA Benefits

Title 38 Code of Federal Regulations Section 3.12(c) states benefits are not payable where the former service member was discharged or released under one of the following conditions:

**Table 4: Discharges that Deny Benefits**

1. As a conscientious objector. (*Note: sometimes Conscientious Objectors had two or more POS's where the COD of one of them may have established eligibility for benefits*)
2. Sentenced by a general court-martial.
3. Resignation by an officer for the good of the service.
4. As a deserter. (*Note: many service members who were charged with desertion had charges reduced to AWOL before or during Article 15 proceedings, Captain's Mast, or court martial, so what matters is the reason for the conviction or punishment.*)
5. As an alien.
6. By reason of a discharge under other than honorable conditions issued as a result of an absence without official leave (AWOL) for a continuous period of at least 180 days. This bar to benefit entitlement does not apply if there are compelling circumstances to warrant the prolonged unauthorized absence.

*The VA cannot make a Character of Service Determination in favor of a veteran who was discharged due to "willful and persistent misconduct" (it's considered dishonorable- see Table 5 below). The VA is allowed to examine the circumstances to determine whether the misconduct was both willful and persistent. If the VA determines the veteran's conduct was not "willful and persistent" the VA can find the veteran's discharge "honorable for VA purposes," but it does not change the actual character of discharge. The VA also cannot make a Character of Service Determination in favor of a veteran who was discharged due to substance abuse.*

*Suggestion: Be specific about what you're asking for from the VA. If you believe your misconduct was not willful, was not persistent, or wasn't both willful and persistent explain why you believe it wasn't. "Buddy statements" may help.*

Title 38 CFR § 3.12(d) states a discharge or release because of one of the offenses specified in the table below is considered to have been issued under dishonorable conditions.

**Table 5: Five Conditions Under Which Discharges are Considered Dishonorable**

1. Acceptance of an undesirable discharge to escape trial by general court-martial.
2. Mutiny or spying
3. An offense involving moral turpitude. This includes generally, conviction of a felony.
4. Willful and persistent misconduct
5. Homosexual acts involving aggravating circumstances or other factors affecting the performance of duty. (*The circumstances that led to such a discharge really matter in this situation. See the complete 38 CFR § 3.12(d)(5) on page 143 for further information.*)



*If you have received a discharge upgrade from a Board for Correction of Military Records, it is final and binding on VA. A Board for Correction of Military Records upgrade sets aside any prior bar to benefits. See Title 38 CFR § 3.12(e), (f), (g), and (h) in the copy of the complete Title 38 CFR § 3.12 beginning on page 142 in this guide for further information. If you have evidence of such an upgrade include it with your claim.*

*If you have received a discharge upgrade from a Discharge Review Board your upgrade is NOT final and binding on the VA if the discharge was because of a General Court Martial. See Title 38 CFR § 3.12(e), (f), (g), and (h) in the copy of the complete Title 38 CFR § 3.12 beginning on page 142 for further information.*

*Title 38 CFR § 3.12(d)(4), Willful and persistent misconduct. This is a situation where the VA is allowed to make an administrative decision (CSD) that may allow granting of VA benefits. If the VA determines the veteran's conduct was not "willful and persistent" the VA can find the veteran's discharge "honorable for VA purposes," but it does not change the actual character of discharge.*

## The Third Question: Are There Special Issues You Should Consider?

*If you were diagnosed with Post Traumatic Stress Disorder (PTSD) in service or after service by a psychiatrist or psychologist, PTSD still must be connected to your service to receive VA disability compensation for it. Please continue reading.*

*If you don't have a PTSD diagnosis but you believe or are willing to consider the possibility that you have PTSD, you will need to present something to the VA to convince them to request a PTSD examination. This is easiest for combat veterans.*

The following list includes all of the medals, ribbons, and badges the VA accepts at face value as evidence of combat. The VA knows that the absence of combat decorations does not mean the veteran did not engage in combat, so if you were in combat but don't have one of the things in the list you can still submit your own statement and "buddy statements."

- Air Force Cross
- Air Medal with V Device
- Army Commendation Medal with V Device
- Bronze Star Medal with V Device
- Combat Action Ribbon
- Combat Aircrew Insignia
- Combat Infantryman Badge
- Combat Medical Badge
- Distinguished Flying Cross
- Distinguished Service Cross
- Joint Service Commendation Medal with V Device
- Medal of Honor
- Navy Commendation Medal with V Device
- Navy Cross
- Purple Heart
- Silver Star

*For veterans who do not have combat experience, or veterans who do but do not have any of the above medals, ribbons or badges, use VA 21-0781 and/or VA 21-0781a and attach it/them to your claim. Suggestion: Read the top of the last page of VA 21-0781a. While the 21-0781a is used for personal trauma, that list might remind you of things you may want to include in your 21-0781 and/or your 21-4138.*

*Service-connected PTSD can also be due to personal trauma. Military Sexual Trauma (MST) is one well-known example. I used to be a VA Military Sexual Trauma (MST) Coordinator. Most service-connected PTSD due to personal trauma is the result of service members being victimized by fellow service members. If you believe that describes your experience I suggest supporting a claim on VA Form 21-0781a.*

*Suggestion: First review the Instructions paragraph at the top of page 1 of VA Form 21-0781a and the section at the top of page 3. Ordinarily the veteran who claims PTSD due to Personal Trauma will receive a phone call from a MST Coordinator. Since the VA probably cannot call you, please identify any person, agency or organization who might have records that might support your claim. They might include Military Police, civilian police, civilian hospitals, ambulance companies, “buddy statements,” etc. Provide the VA as much information as you can, such as dates, locations, hospital names, police departments and such. If you have identified all possible sources please state that on the 21-0781a and/or a 21-4138.*

**Mental Conditions Other Than PTSD:** *VA disability benefits for mental conditions aren’t based on clinical diagnoses. They’re based on impairment. The rating criteria are set in Title 38 CFR Section 4.130.*

*I included the table below to show you the criteria for VA disability compensation for mental conditions. I acknowledge that PTSD is more “socially acceptable” for veterans, but there’s no good reason to claim PTSD if you were diagnosed with a different mental condition in service. If you were diagnosed with a mental condition while in service I suggest you claim the same condition as a service-connected disability. Besides, any treatment you receive, whether inside or outside, should be based on a correct diagnosis.*

*I’ve seen veterans with in-service diagnoses ranging from depression to bipolar claim PTSD. Suggestion: It’s easier to demonstrate to the VA that you have a disability now if you had been diagnosed with the same one in service. In any case, you may not be able to name enough stressful incidents on a 21-0781 for the VA to order an exam and since benefits are not based on diagnosis, having a diagnosis different from the one you had in service, or having two (or more) diagnoses won’t increase your disability rating and disability compensation anyway.*

**Table 6: General Rating Formula for Mental Disorders**

Total occupational and social impairment, due to such symptoms as: gross impairment in thought processes or communication; persistent delusions or hallucinations; grossly inappropriate behavior; persistent danger of hurting self or others; intermittent inability to perform activities of daily living (including maintenance of minimal personal hygiene); disorientation to time or place; memory loss for names of close relatives, own occupation, or own name → 100%

Occupational and social impairment, with deficiencies in most areas, such as work, school, family relations, judgment, thinking, or mood, due to such symptoms as: suicidal ideation; obsessional rituals which interfere with routine activities; speech intermittently illogical, obscure, or irrelevant; near-continuous panic or depression affecting the ability to function independently, appropriately and effectively; impaired impulse control (such as unprovoked irritability with periods of violence); spatial disorientation; neglect of personal appearance and hygiene; difficulty in adapting to stressful circumstances (including work or a worklike setting); inability to establish and maintain effective relationships → 70%

Occupational and social impairment with reduced reliability and productivity due to such symptoms as: flattened affect; circumstantial, circumlocutory, or stereotyped speech; panic attacks more than once week; difficulty in understanding complex commands; impairment of short- and long-term memory (e.g., retention of only highly learned material, forgetting to complete tasks); impaired judgment; impaired abstract thinking; disturbances of motivation and mood; difficulty in establishing and maintaining effective work and social relationships → 50%

Occupational and social impairment with occasional decrease in work efficiency and intermittent periods of inability to perform occupational tasks (although generally functioning satisfactorily, with routine behavior, self-care, and conversation normal), due to such symptoms as: depressed mood, anxiety, suspiciousness, panic attacks (weekly or less often), chronic sleep impairment, mild memory loss (such as forgetting names, directions, recent events) → 30%

Occupational and social impairment due to mild or transient symptoms which decrease work efficiency and ability to perform occupational tasks only during periods of significant stress, or; symptoms controlled by continuous medication → 10%

A mental condition has been formally diagnosed, but symptoms are not severe enough either to interfere with occupational and social functioning or to require continuous medication → 0%

### **Reduction of Payments for Service-Connected Disability Compensation During**

**Incarceration:** Congress restricts the amount of benefits that may be paid to a Veteran or dependent while he or she is incarcerated.

#### **Title 38 USC Section 5313 (a) and Title 38 CFR Section 3.665(a) and (d)**

If a Veteran is incarcerated as the result of a “felony” conviction as defined by law:

“Any offense punishable by death or imprisonment for a term exceeding one year, unless specifically categorized as a misdemeanor under the law of the prosecuting jurisdiction.”

Then, the amount paid to a Veteran incarcerated for a service-connected disability is generally limited by law to the 10 percent disability rate, or half the amount of the ten percent rate if the Veteran’s disability rating is 10 percent. (If the Veteran is rated before incarceration as 20 percent disabled or higher, he will receive only the amount payable to a 10 percent disabled Veteran.)

A Veteran may not receive non-service connected VA pension benefits, or any portion of these benefits, while incarcerated for a felony or misdemeanor. However, his family may receive an apportionment of such benefits under the procedure described above. (See Title 38 CFR Sec.3.666)

**Apportionment:** The veteran can only receive a portion of the full amount payable for his or her disability rating; but any remaining balance may be “apportioned to the individual’s dependent family.” To apply for apportionment, the veteran must send a letter that identifies the veteran and the apportionment claimant and makes it clear they are requesting an apportionment of his/her VA benefits to the VA Regional Office (VARO) that has jurisdiction over the veteran’s case. VA regulations clearly specify this apportionment amount will only go to family members if they can show financial need for such amount. This applies to the spouse, children, or dependent parents who are involved in the application.

In deciding whether any apportionment is appropriate, the amount of the apportionment, and to whom it will go, the following factors are considered:

- The family member’s income and living expenses;
- The amount of compensation available to be apportioned;
- The needs and living expenses of other family members; and
- Special needs of any of the family members.

For example: a veteran incarcerated rated as 80 percent disability can only receive the amount he or she would get if he or she were 10 percent disabled and not incarcerated. However, his or her family may be apportioned the remainder of the 80 percent benefit. There is a 60-day “grace period” following conviction where the veteran, or Dependency or Indemnity Compensation (DIC) recipient, may still receive full benefits. If the veteran continues to receive benefits after the 60-day period, it will result in an “overpayment”. The VA considers it to be the recipient’s responsibility and fault if this occurs because the recipient failed to notify the VA of his or her

incarceration. Attempts to obtain a waiver in these situations of overpayment are often unsuccessful. As a rule, the veteran loses most, if not all, financial benefits until the VA recovers the entire overpayment. It has also been a standard procedure that the family will not be entitled to receive an apportionment until the debt is completely recovered.

For more information concerning VA debt collection rules that may affect incarcerated veterans request assistance from a Veterans Service Organization representative, write to your county Veterans Service Office, or your VA Regional Office.

One other restriction on veteran's incarcerated eligibility for service-connected disability compensation is that: "No total disability rating based on un-employability, may be assigned to an incarcerated veteran." *If the Individual Unemployability benefit is granted to you based on a disability compensation claim you cannot receive it while incarcerated nor can you apportion it.*

It is important to remember that most VA decisions, including those on apportionment, can be appealed to the Board of Veterans Appeals and, if need be, to the Court of Appeal for Veterans Affairs. See the "After the VA Decides Your Claim section on page 140 for further information.

**Re-starting Benefits at Release:** It is important that each disabled veteran receiving compensation payments promptly notify VBA Regional Office. Regular full benefit payments should be restored or started upon release provided the VA is notified of the veteran's release, including placement within a community treatment center or halfway house in the community, within one year of release. Notification of your incarceration and release from incarceration can be reported on VA Form 21-4193. This form requires confirmation of the dates of incarceration to be completed by an official at the institution. The Transitional Case Management Program (TCMP) staff located at each of the state prisons possess the form and are authorized to assist you with completion of VA Form 21- 4193 as you are preparing for release from incarceration. This form should be mailed to the VBA Regional Office found at the beginning of this section of the Guidebook.

*Suggestions: Ask a prison representative to submit another one 30 days before your release date, and call the VA National Call Center yourself after release (1-800-827-1000) to make sure the VA has the 21-4193. If you have a VA Claim File Number ("C-file") and/or a service number make sure they are on the 21-4193.*

**Seeking Benefits On Your Own:** Although you are encouraged to seek the aid of a service representative; you may choose to apply for VA benefits on your own. Most of the commonly-used forms are included in this supplement. It is comb bound so the forms can lay flat on a copier. You can also write your local VA Regional Office or your county veterans service office requesting forms. If you, or someone who is able to help you, has internet access the forms are also available online at: [www.vba.va.gov/pubs/forms1.htm](http://www.vba.va.gov/pubs/forms1.htm) .

Below are brief descriptions of forms needed to file for certain VA benefits. Be sure you use a return address where responses will get to you as quickly as possible. *Suggestion: Make photocopies of all the forms you submit for your own records before sending your packet to the VARO nearest you.*

## **Forms, Submitting Your Claim, and Suggested Sequence of Submittal**

**First forms to consider sending: Either VA Form 21-22, Appointment of Veterans Service Organization as Claimant's Representative or VA Form 21-22a, Appointment of Individual as Claimant's Representative.**

**VA 21-22:** *If you choose to have a veterans service organization (VSO) represent and/or assist you this is the form you use. It's used to grant Power of Attorney to any one of the Veterans Services Organizations recognized by the VA. They are all listed on the back of the form. This only authorizes that one VSO to represent you to the VA and only to the VA, but it grants that VSO power of attorney until one of four things happens: you change your representative with a new 21-22, with a 21-22a, you cancel your representation without naming a new representative, or your chosen representative chooses to no longer represent you.*

**VA 21-22a:** *If you choose to have an individual represent and/or assist you this is the form you use. It's used to grant Power of Attorney to any one agency, attorney, or individual. The VA does not recognize any form of Power of Attorney other than the 21-22 or 21-22a. If you choose not to have someone or some VSO represent you to the VA you do not need to send either form.*

**Cautions:** *(1) The 21-22a must be signed once on each side by the veteran and once on each side by your chosen representative. (2) The 21-22a only allows that agency, attorney, or individual to represent you for that one claim. When the claim is finalized by the VA that power of attorney expires. (3) If you submit a new 21-22 or new 21-22a the power of attorney granted by the previous one is automatically cancelled. If you chose to have an agency, attorney, or individual represent you for a subsequent claim you need to submit a new 21-22a.*

*The 21-22 and 21-22a are listed here first because one or the other is probably the first form you should submit. Most California county Veteran Service Offices (Veteran Service Office will always be spelled out here to avoid confusion with VSOs) represent both the bigger VSOs and the California Department of Veterans Affairs. All the VSOs the VA recognizes are listed on the back of the 21-22. If you choose one of the smaller VSOs you can write either your VA Regional Office or your county Veterans Service Officer for the address for your chosen VSO.*

*The form must be completed and signed by the veteran, then sent to the VSO. VSOs rarely choose not to represent a veteran unless they serve specific types of veterans and you are not one of them. Important: the 21-22 form must be signed by your chosen VSO for the VA to accept it and allow them access to your claim information, so you cannot just sign it and send it to the VA. If the VSO accepts you, their representative will sign it and forward it to the VA. Submitting a subsequent 21-22 for another VSO automatically cancels the previous one.*

**VA 21-0845, Authorization to Disclose Personal Information to a Third Party.** *This is used to identify non-accredited (non-VSO, agencies not accredited by the VA, attorneys not accredited by the VA, and/or individuals other than one identified on a 21-22a) third parties that can be given information about your claim. This in no way implies that these parties "represent" you in any way. They will be allowed to receive information about your claim but are not granted any decision-making authority.*

## **Veteran Service Offices by County**

### **Alameda CVSO**

6955 Foothill Blvd., Suite 300  
Oakland, CA 94605

### **Amador CVSO**

1141 American Legion Way  
Jackson, CA 95642

### **Butte CVSO**

2445 Carmichael Dr.  
Chico, CA 95928

### **Calaveras CVSO**

509 East Saint Charles St.  
San Andreas, CA 95249

### **Colusa CVSO**

901 Parkhill St.  
Colusa, CA 95932

### **Contra Costa CVSO**

10 Douglas Dr., #100  
Martinez, CA 94553

### **Del Norte CVSO**

810 H Street  
Crescent City, CA 95531

### **El Dorado CVSO**

130 Placerville Dr., Suite B  
Placerville, CA 95667

### **Fresno CVSO**

3845 N. Clark, Suite 103  
Fresno, CA 93726

### **Glenn CVSO**

525 W. Sycamore St., Suite A5  
Willows, CA 95988

### **Humboldt CVSO**

825 5th St., Room 310  
Eureka, CA 95501

### **Kern CVSO**

1120 Golden State Ave.  
Bakersfield, CA 93301

### **Humboldt CVSO**

825 5th St., Room 310  
Eureka, CA 95501

### **Inyo CVSO**

County Services Building  
207 West South Street  
Bishop, CA 93514

### **Kings CVSO**

1400 W. Lacey Blvd  
County Government Center  
Law Bldg. #4  
Hanford, CA 93230

### **Lake CVSO**

255 North Forbes St.  
Lakeport, CA 95453

### **Lassen CVSO**

Veterans Memorial Building  
1205 Main St.  
Susanville, CA 96130

### **Los Angeles CVSO**

2615 S. Grand Ave., Suite 100  
Los Angeles, CA 90007

### **Madera CVSO**

200 W. Fourth St  
Madera, CA 93637

### **Marin CVSO**

10 North San Pedro Rd., Suite 1010  
San Rafael, CA 94903

### **Mariposa CVSO**

5085 Bullion St.  
Mariposa, CA 95338



**Mendocino CVSO**

405 Observatory Ave.  
Ukiah, CA 95482

**Merced CVSO**

3376 N. Hwy 59, Suite D  
Merced, CA 95341

**Modoc CVSO**

211 E. First St.  
Alturas, CA 96101

**Mono CVSO**

County Services Building  
207 West South Street  
Bishop, CA 93514

**Monterey CVSO**

1200 Aguajito Rd., Room 003  
Monterey, CA 93940

**Napa CVSO**

900 Coombs Suite 257  
Napa, CA 94559

**Nevada CVSO**

255 South Auburn St.  
Grass Valley, CA 95945

**Orange CVSO**

County Operations Center  
1300 S. Grand Ave., Bldg. B  
Santa Ana, CA 92705

**Placer CVSO**

1000 Sunset Blvd., Suite 115  
Rocklin, CA 95765

**Plumas CVSO**

Health & Human Services Office  
270 County Hospital Rd., Suite 206  
Quincy, CA 95971

**Riverside CVSO**

4360 Orange St.  
Riverside, CA 92501

**Sacramento CVSO**

2007 19th St.  
Sacramento, CA 95818

**San Benito CVSO**

300 West St.  
Hollister, CA 95023

**San Bernardino CVSO**

175 West 5th t., 2nd Floor  
San Bernardino, CA 92415

**San Diego CVSO**

5560 Overland Dr., Suite 310  
San Diego, CA 92123

**San Francisco CVSO**

27 B Van Ness Ave  
San Francisco, CA 94102

**San Joaquin CVSO**

105 S. San Joaquin St.  
Stockton, CA 95202

**San Luis Obispo CVSO**

801 Grand Ave.  
San Luis Obispo, CA 93408

**San Mateo CVSO**

400 Harbor Blvd., Bldg. B  
Belmont, CA 94002

**Santa Barbara CVSO**

511 E. Lakeside Pkwy  
Santa Maria, CA 93455

**Santa Clara CVSO**

68 N. Winchester Blvd.  
Santa Clara, CA 95050

**Santa Cruz CVSO**

1400 Emerline Ave., Bldg. K,  
3<sup>rd</sup> Floor  
Santa Cruz, CA 95060

**Shasta CVSO**  
1855 Shasta St.  
Redding, CA 96001

**Siskiyou CVSO**  
105 E. Oberlin Rd.  
Yreka, CA 96097

**Solano CVSO**  
675 Texas St., Suite 4700  
Fairfield, CA 94533

**Sonoma CVSO**  
3725 Westwind Blvd., Suite 101  
Santa Rosa, CA 95402

**Stanislaus CVSO**  
121 Downey Ave., Suite 102  
Modesto, CA 95354

**Sutter CVSO**  
See Yuba-Sutter below

**Tehama CVSO**  
633 Washington St., Room 15  
Red Bluff, CA 96080

**Trinity CVSO**  
100 Memorial Dr.  
Weaverville, CA 96093

**Tulare CVSO**  
205 N. L Street  
Tulare, CA 93274

**Tuolumne CVSO**  
105 E. Hospital Rd.  
Sonora, CA 95370

**Ventura CVSO**  
855 Partridge Dr.  
Ventura, CA 93003

**Yolo CVSO**  
120 W. Main St., Suite A  
Woodland, CA 95695

**Yuba-Sutter CVSO**  
5730 Packard Ave., Suite 300  
Marysville, CA 95901

**Second form to consider sending: VA 21-0966, Intent to File a Claim for Compensation and/or Pension, or Survivors Pension and/or DIC.** *If you intend to file for any of those four VA benefits listed in its title I suggest you complete and submit this form. In short, this form “holds your place in line” up to one year while you prepare your claim. If the VA grants you benefits they will back date them to the first of the month after they received your 21-0966.*

*If you are submitting your first disability compensation claim ever the 21-0966 must be signed (“wet-signed”) by you. Anyone granted power of attorney by 21-22 or 21-22a can file a 21-0966 on your behalf in subsequent claims.*

**Your claim document and possible supporting documents:**

**VA 21-526EZ, Notice to Veteran/Service Member of Evidence Necessary to Substantiate a Claim for Veterans Disability Compensation and Related Compensation Benefits.** *This form must be submitted to apply for disability compensation. Attach a copy of your DD-214(s) and any of the following forms that are appropriate to the VARO nearest your release destination or your current location. **Important:** Any initial claim for VA benefits must be signed (“wet signed”) by you. Subsequent claims can be submitted on your behalf by anyone granted power of attorney by 21-22 or 21-22a, but the first 21-526EZ must be signed by you.*

**VA 21-4138, Statement in Support of Claim.** Sort of the “blank page” of VA forms, this lets you explain anything you think needs explained to the VA. For example, you can use it to tell the VA when, where, and, if necessary, “your side of the story” for things such as an Other-Than-Honorable discharge, and to request a CSD. It’s best to have an experienced VSO representative help you complete the form if possible, or have one review it before you submit it, but it’s not required.

**VA 21-4142, Authorization for Release of Information - and VA 21-4142a, General Release for Medical Provider Information to the Department of Veterans Affairs.** If, after your service, you have received medical or mental health care that may be relevant to your claim from anyone other than a VA Medical Facility, the VA will need to fill out a VA Form 21-4142. That form gives permission for release of medical records to the VA. The other form, 21-4142a, tells the VA where those records are so the VA can request them. The VBA has access to the VA’s Veterans Health Administration (VHA) medical center, hospital, and clinic records, so you do not need to submit a 4142 and 4142a for those records.

**Important:** If you have received treatment from a Vet Center the VA will need a 4142 and 4142a for the Vet Center to release your records.

**Also important:** if you have been incarcerated at more than one facility and received medical care at more than one facility please make sure are all identified on the 21-4142a. Use additional 21-4142a’s if necessary.

**VA 21-0781, Statement in Support of Claim for Service Connection for Post-Traumatic Stress Disorder (PTSD).** When PTSD is claimed as a disability on VA Form 21-526EZ this is used to document and explain the stressful incident or incidents (other than personal assaults) that occurred in service that you feel contributed to your current condition.

*Note: You can submit both a 21-0781 and a 21-0781a if appropriate for your situation.*

*Suggestion: Even if you only submit a 21-0781 review the information at the top of page 3 of the 21-0781a. The stressors on the top of page 3 of the 21-0781a may remind you of things you may want to include in your 21-0781.*

**VA Form 21-0781a, Statement in Support of Claim for Service Connection for Post-Traumatic Stress Disorder (PTSD) Secondary to Personal Assault.** When PTSD due to personal assault is claimed as a disability on VA Form 21-526EZ this is used to document and explain the stressful incident or incidents that occurred in service that you feel contributed to your current condition. Most claims that come to the VA with this form are routed to either the Female Military Sexual Trauma (MST) Coordinator or the Male MST Coordinator. The principal duties of those workers is evidence collection- collecting all available evidence that the veteran identifies that might support the PTSD claim, such as military police reports, civilian police reports, civilian medical records, and such. This is usually done by phone call. Since the VA probably cannot call you, please identify every record you know of that might support your claim so the VA can try to obtain them.

**VA Form 10-10EZ, Enrollment for Medical Benefits.** *This is used by the VA to determine if you can receive medical benefits. You may not be able to use VA medical care yet, but if the VA needs to do an exam to evaluate your claim for service-connected disability, whether by sending a VA examiner to your facility or having you sent to a VA facility, they will need your information.*

*If you are not currently receiving any VA benefits you should attach a copy of your DD-214(s).*

*If you have any discharge that is a bar to VA benefits, and one that is Honorable or General Under Honorable Conditions, make sure you send copies of all of your DD-214s.*

*If you have received an upgrade from a Discharge Review Board or Board for the Correction of Military Records, or a VA Character of Service Determination in your favor include a copy of those documents.*

*Complete the 10-10EZ form and send it to the VA medical facility where you will seek evaluation for treatment or a disability exam.*

VA Central California Health Care System  
2615 E. Clinton Avenue  
Fresno, CA 93703

Sacramento VA Medical Center  
10535 Hospital Way  
Mather, CA 95655

VA Loma Linda Healthcare System  
11201 Benton Street  
Loma Linda, CA 92357

VA Palo Alto Health Care System  
3801 Miranda Avenue  
Palo Alto, CA 94304-1290

VA Long Beach Healthcare System  
5901 East 7th Street  
Long Beach, CA 90822

VA San Diego Healthcare System  
3350 La Jolla Village Dr.  
San Diego, CA 92161

West Los Angeles Medical Center  
11301 Wilshire Blvd  
Los Angeles, CA 90073

San Francisco VA Health Care System  
4150 Clement Street  
San Francisco, CA 94121

**VA 70-3288, Request for and Consent to Release of Information from Claimant's Records.** *Used to get your VA records from VA facilities (regional offices, medical centers, outpatient clinics, and vet centers). Request a fee waiver under section Title 38 C.F.R. Sec.1.526 (h), which requires VAROs to provide a veteran with one set of his or her records free of charge. If you don't have access to a computer with a CD drive, or are not allowed to receive a CD, request hard copies.*

**SF-180, Request Pertaining to Military Records.** *Used to request information from military records. Certain identifying information is necessary to determine the location of an individual's record of military service. Please try to answer each item on the SF-180. If you do not have and cannot obtain the information for an item, show "NA," meaning the information is "not available." Include as much of the requested information as you can. Incomplete information may delay response time. To determine where to mail this request see Page 2 of the SF-180 for record*

*locations and facility addresses. If you don't have access to a computer with a CD drive, or are not allowed to receive a CD, request hard copies.*

**DD Form 149, Application for Correction of Military Record Under the Provisions of Title 10, U.S. Code, Section 1552.** *Used to request a discharge upgrade if your discharge was more than fifteen years ago. Addresses for the different services are on the back.*

**DD Form 293, Application for the Review of Discharge or Dismissal from the Armed Forces of the United States.** *Used to request a discharge upgrade if your discharge was less than fifteen years ago. Addresses for the different services are on the back.*

**VA 21-4193, Notice to Department of Veterans Affairs of Veteran or Beneficiary Incarcerated in Penal Institution.** *This should be completed by a prison representative and sent to the VA as soon as a release date is scheduled, but you may need to initiate this since the prison may not have all the necessary information (such as a VA file number or your service number).*

*Suggestions: Ask a prison representative to submit another one 30 days before your release date, and call the VA National Call Center yourself after release (1-800-827-1000) to make sure the VA has the 21-4193.*

**NA Form 13055, Request for Information Needed to Reconstruct Medical Data, and NA Form 13075, Questionnaire About Military Service.** *The 13055 and 13075 are used to request any of your records held by the National Personnel Records Center, but only if you were discharged before July 12, 1973. That's when a fire destroyed many of the records that were there then. Everyone else should use the SF-180, Request Pertaining to Military Records.*

*Suggestion: complete both as completely as you can and include them with your claim. The VA would be using exactly the same forms themselves, but if you complete them as best you can it help the VA give the National Personnel Records Center the most complete information possible.*

## What Happens After You Submit a Claim?

**Records:** *If you have never filed a claim for a VA benefit, records requests are where VA processing begins, including requests for your service personnel records, service medical records, and medical records from any medical provider for which you provided completed VA Forms 21-4142 and 21-4142a. Since it's unlikely the VA can call you, you will likely receive a letter asking questions unique to your claim. You will also receive what's called a 5103 notice, which asks you whether you have submitted all the evidence you have that you want considered. It's pretty self-explanatory- you either tell the VA that you have submitted everything in your possession and you have identified all the sources of information that you want the VA to collect, along with 21-4142 and 21-4142a's if appropriate (for Vet Centers, civilian and prison hospitals where you may have received care, etc.), or you check the "give me more time" block and return the dated, signed form. The VA will attempt to collect whatever information you have identified.*

*Suggestion: Since you may not be able to call former service members asking for "buddy statements," you may want to have your buddy prepare his/her statement and mail the dated, signed original to you. Ask him/her to include appropriate personal information such as unit assignment and service number, and contact information, including address and phone number. Then you can decide whether you want to use that statement in your claim. If you submitted a 21-0966 your "place in line" is preserved up to a year, so you should have time to collect "buddy statements."*

**Is an Examination Needed?** *After your records are received and reviewed, some of the disabilities you claim might be denied outright because the VA did not find any evidence in your records or in the evidence you provided that established a connection to your service. Sometimes the VA can make decisions based on available medical records. If, for instance, you have had a hip replaced and there is evidence of a hip condition in your service medical records, the VA may be able to grant service connection for the hip replacement without an examination.*

**If an Examination is Needed:** *The VA is obligated to address all of your claimed disabilities one way or another. If the VA decides an examination is necessary they may send a VA examiner to your facility, or make arrangements to have you taken to a VA facility.*

## **After the VA Decides Your Claim**

After the VA has made a decision on your claim they will notify you by mail. I want to briefly touch on four actions you may want to consider post-decision.

(1) If you doubt you have been rated correctly, Title 38 CFR 4.1 through 4.31 govern VA rating policies, while Title 38 CFR 4.40 through 4.150 dictate the disability ratings. They are determined by the severity of the condition. You should be able to research those CFRs in your prison library.

Regarding the overall disability rating granted by the VA, they use a Combined Ratings Table found at Title 38 CFR 4.25. Very briefly, they start with the most disabling condition and deduct that from 100%. For instance, 100% minus a 50% disabling condition yields 50% disabled and, in Title 38 CFR 4.25, 50% efficiency. They then take the second most disabling and multiply that condition's rating by the 50% efficiency remaining after the deduction for the most disabling condition. For instance, if the second most disabling is rated 40%, they start with the 50% efficiency remaining after applying the most disabling condition's rating, taking 40% of 50%, giving 20%. If those are the only two disabilities granted disability compensation, the veteran will get a 70% overall rating (50% disabled plus 40% of 50% efficiency (20%) gives a 70% disability rating).

(2) If you disagree with the VA decision, and you have looked at Title 38 CFR 4.1 through 4.150 as suggested above, you have three options.

Option one: The VA does not regard a decision as final until one year after they made it. Within a year you can request reconsideration of their decision. If you can identify something in your service medical or personnel records you think they did not consider, cite it. If you think the VA did not follow something in Title 38 CFR 4, explain what you disagree with.

Option two: Again, because the VA does not regard their decision as final until one year after they have made it, option two is providing the VA evidence that is both new and material within a year. First they will review what you have provided to see if it is new. In other words, was what you have now provided not previously available to the VA? If so, it's new to the VA. And the VA will review what you have provided to see if it material (relevant) to the decision. If what you have now provided is both new and material the VA will reconsider the decision, but there is no guarantee the VA will change the decision.

Option three: You can appeal. The decision letter will have instructions and the appropriate forms, so it will not be discussed further here.

(3) If you have dependents you can request apportionment of any financial benefits that you cannot receive under the reduction of disability compensation for incarcerated veterans (see page 130 for further information about both reduction and apportionment).

(4) Claims For Increase (CFIs): If a disability that has been previously rated by the VA, even one that was rated 0%, gets worse you can file a new 21-526EZ requesting an increase. Recall that the VA does not consider a decision finalized until one year after the decision is made. Because of that

the VA generally does not take action on a CFI submitted less than one year after a decision unless you can provide evidence that your condition has worsened.

## **Finally**

When I was working for the VA I worked many claims from incarcerated veterans. Only after leaving the VA have I learned that many incarcerated veterans know little or nothing about benefits they may have earned in service. As I now know, the current official Guidebook does not adequately address the needs of veterans who do not yet have a release date or are incarcerated without the possibility of parole, so I have tried to fill those inadequacies in this supplement.

I know there are incarcerated veterans who do not qualify for VA benefits, and others might be unwilling to apply, but I sincerely hope this helps some of the many veterans incarcerated in California.

MPA, CWO4, retired



## **Appendix: The Complete Text of Title 38 Code of Federal Regulations Section 3.12**

Title 38 § 3.12 Character of discharge.

(a) If the former service member did not die in service, pension, compensation, or dependency and indemnity compensation is not payable unless the period of service on which the claim is based was terminated by discharge or release under conditions other than dishonorable. (Title 38 U.S.C. § 101(2)). A discharge under honorable conditions is binding on the Department of Veterans Affairs as to character of discharge.

(b) A discharge or release from service under one of the conditions specified in this section is a bar to the payment of benefits unless it is found that the person was insane at the time of committing the offense causing such discharge or release or unless otherwise specifically provided (Title 38 U.S.C. § 5303(b)).

(c) Benefits are not payable where the former service member was discharged or released under one of the following conditions:

- (1) As a conscientious objector who refused to perform military duty, wear the uniform, or comply with lawful order of competent military authorities.
- (2) By reason of the sentence of a general court-martial.
- (3) Resignation by an officer for the good of the service.
- (4) As a deserter. (*Note: many service members who were charged with desertion had charges reduced to AWOL, so check your own situation if you were charged with desertion.*)
- (5) As an alien during a period of hostilities, where it is affirmatively shown that the former service member requested his or her release. See §3.7(b).
- (6) By reason of a discharge under other-than-honorable conditions issued as a result of an absence without official leave (AWOL) for a continuous period of at least 180 days. This bar to benefit entitlement does not apply if there are compelling circumstances to warrant the prolonged unauthorized absence. This bar applies to any person awarded an honorable or general discharge prior to October 8, 1977, under one of the programs listed in paragraph (h) of this section, and to any person who prior to October 8, 1977, had not otherwise established basic eligibility to receive Department of Veterans Affairs benefits. The term established basic eligibility to receive Department of Veterans Affairs benefits means either a Department of Veterans Affairs determination that an other-than-honorable discharge was issued under conditions other than dishonorable, or an upgraded honorable or general discharge issued prior to October 8, 1977, under criteria other than those prescribed by one of the programs listed in paragraph (h) of this section. However, if a person was discharged or released by reason of the sentence of a general court-martial, only a finding of insanity (paragraph (b) of this section) or a decision of a board of correction of records established under 10 U.S.C. 1552 can establish basic eligibility to receive Department of Veterans Affairs benefits. The following factors will be considered in determining whether there are compelling circumstances to warrant the prolonged unauthorized absence.

- (i) Length and character of service exclusive of the period of prolonged AWOL. Service exclusive of the period of prolonged AWOL should generally be of such quality and length that it can be characterized as honest, faithful and meritorious and of benefit to the Nation.
- (ii) Reasons for going AWOL. Reasons which are entitled to be given consideration when offered by the claimant include family emergencies or obligations, or similar types of obligations or duties owed to third parties. The reasons for going AWOL should be evaluated in terms of the person's age, cultural background, educational level and judgmental maturity. Consideration should be given to how the situation appeared to the person himself or herself, and not how the adjudicator might have reacted. Hardship or suffering incurred during overseas service, or as a result of combat wounds of other service-incurred or aggravated disability, is to be carefully and sympathetically considered in evaluating the person's state of mind at the time the prolonged AWOL period began.
- (iii) A valid legal defense exists for the absence which would have precluded a conviction for AWOL. Compelling circumstances could occur as a matter of law if the absence could not validly be charged as, or lead to a conviction of, an offense under the Uniform Code of Military Justice. For purposes of this paragraph the defense must go directly to the substantive issue of absence rather than to procedures, technicalities or formalities.

***Note:** Title 38 CFR § 3.12(c)(6) has allowed many veteran's discharges to be found to be under conditions other-than-dishonorable, but be advised many veterans whose records have been examined under section (6) above for their periods of AWOL fail the "Service exclusive of the period of prolonged AWOL should generally be of such quality and length that it can be characterized as honest, faithful and meritorious and of benefit to the Nation" test.*

(d) A discharge or release because of one of the offenses specified in this paragraph is considered to have been issued under dishonorable conditions.

- (1) Acceptance of an undesirable discharge to escape trial by general court-martial.
- (2) Mutiny or spying.
- (3) An offense involving moral turpitude. This includes, generally, conviction of a felony.
- (4) Willful and persistent misconduct. This includes a discharge under other-than-honorable conditions, if it is determined that it was issued because of willful and persistent misconduct. A discharge because of a minor offense will not, however, be considered willful and persistent misconduct if service was otherwise honest, faithful and meritorious.
- (5) Homosexual acts involving aggravating circumstances or other factors affecting the performance of duty. Examples of homosexual acts involving aggravating circumstances or other factors affecting the performance of duty include child molestation, homosexual prostitution, homosexual acts or conduct accompanied by assault or coercion, and homosexual acts or conduct taking place between service members of disparate rank, grade, or status when a service member has taken advantage of his or her superior rank, grade, or status.

(e) An honorable discharge or discharge under honorable conditions issued through a board for correction of records established under authority of 10 U.S.C. 1552 is final and conclusive on the Department of Veterans Affairs. The action of the board sets aside any prior bar to benefits imposed under paragraph (c) or (d) of this section.

(f) An honorable or general discharge issued prior to October 8, 1977, under authority other than that listed in paragraphs (h) (1), (2) and (3) of this section by a discharge review board established under 10 U.S.C. 1553 set aside any bar to benefits imposed under paragraph (c) or (d) of this section except the bar contained in paragraph (c)(2) of this section.

(g) An honorable or general discharge issued on or after October 8, 1977, by a discharge review board established under 10 U.S.C. 1553, sets aside a bar to benefits imposed under paragraph (d), but not paragraph (c), of this section provided that:

- (1) The discharge is upgraded as a result of an individual case review;
- (2) The discharge is upgraded under uniform published standards and procedures that generally apply to all persons administratively discharged or released from active military, naval or air service under conditions other than honorable; and
- (3) Such standards are consistent with historical standards for determining honorable service and do not contain any provision for automatically granting or denying an upgraded discharge.

(h) Unless a discharge review board established under 10 U.S.C. 1553 determines on an individual case basis that the discharge would be upgraded under uniform standards meeting the requirements set forth in paragraph (g) of this section, an honorable or general discharge awarded under one of the following programs does not remove any bar to benefits imposed under this section:

- (1) The President's directive of January 19, 1977, implementing Presidential Proclamation 4313 of September 16, 1974; or
- (2) The Department of Defense's special discharge review program effective April 5, 1977; or
- (3) Any discharge review program implemented after April 5, 1977, that does not apply to all persons administratively discharged or released from active military service under other than honorable conditions.

(i) No overpayments shall be created as a result of payments made after October 8, 1977, based on an upgraded honorable or general discharge issued under one of the programs listed in paragraph (h) of this section which would not be awarded under the standards set forth in paragraph (g) of this section. Accounts in payment status on or after October 8, 1977, shall be terminated the end of the month in which it is determined that the original other-than-honorable discharge was not issued under conditions other than dishonorable following notice from the appropriate discharge review board that the discharge would not have been upgraded under the standards set forth in paragraph (g) of this section, or April 7, 1978, whichever is the earliest. Accounts in suspense (either before or after October 8, 1977) shall be terminated on the date of last payment or April 7, 1978, whichever is the earliest.

(j) No overpayment shall be created as a result of payments made after October 8, 1977, in cases in which the bar contained in paragraph (c)(6) of this section is for application. Accounts in payment status on or after October 8, 1977, shall be terminated at the end of the month in which it is determined that compelling circumstances do not exist, or April 7, 1978, whichever is the earliest. Accounts in suspense (either before or after October 8, 1977) shall be terminated on the date of last payment, or April 7, 1978, whichever is the earliest.

(k) Uncharacterized separations. Where enlisted personnel are administratively separated from service on the basis of proceedings initiated on or after October 1, 1982, the separation may be classified as one of the three categories of administrative separation that do not require characterization of service by the military department concerned. In such cases conditions of discharge will be determined by the VA as follows:

- (1) Entry level separation. Uncharacterized administrative separations of this type shall be considered under conditions other than dishonorable.
- (2) Void enlistment or induction. Uncharacterized administrative separations of this type shall be reviewed based on facts and circumstances surrounding separation, with reference to the provisions of §3.14 of this part, to determine whether separation was under conditions other than dishonorable.
- (3) Dropped from the rolls. Uncharacterized administrative separations of this type shall be reviewed based on facts and circumstances surrounding separation to determine whether separation was under conditions other than dishonorable. (Authority: 38 U.S.C. 501)

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## Forms

VA = Veterans Affairs DD = Department of Defense NA = National Archives SF = Standard Form

<b>VA 21-22</b>	..... Appointment of Veterans Service Organization as Claimant's Representative
<b>VA 21-22a</b>	..... Appointment of Individual as Claimant's Representative
<b>VA 21-0845</b>	..... Authorization to Disclose Information to a Third Party
<b>VA 21-0966</b>	..... Intent to File a Claim for Compensation and/or Pension, or Survivors Pension and/or DIC
<b>VA 21-526EZ</b>	..... Notice to Veteran/Service Member of Evidence Necessary to Substantiate a Claim for Veterans Disability Compensation and Related Compensation Benefits
<b>VA 21-4138</b>	..... Statement in Support of Claim
<b>VA 21-4142</b>	..... Authorization to Disclose Information to the Department of Veterans Affairs (VA)
<b>VA 21-4142a</b>	..... General Release for Medical Provider Information to the Department of Veterans Affairs (VA)
<b>VA 21-0781</b>	..... Statement in Support of Claim for Service Connection for Post-Traumatic Stress Disorder (PTSD)
<b>VA 21-0781a</b>	..... Statement in Support of Claim for Service Connection for Post-Traumatic Stress Disorder (PTSD) Secondary to Personal Assault
<b>VA 10-10EZ</b>	..... Application for Health Benefits
<b>VA 70-3288</b>	..... Request for and Consent to Release of Information from Individual's Records
<b>SF 180</b>	..... Request Pertaining to Military Records
<b>DD Form 149</b>	..... Application for Correction of Military Record Under the Provisions of Title 10, U.S. Code, Section 1552
<b>DD Form 293</b>	..... Application for the Review of Discharge from the Armed Forces of the United States
<b>VA 21-4193</b>	..... Notice to Department of Veterans Affairs of Veteran or Beneficiary Incarcerated in Penal Institution
<b>NA Form 13055</b>	..... Request for Information Needed to Reconstruct Medical Data
<b>NA Form 13075</b>	..... Questionnaire About Military Service



Department of Veterans Affairs

**APPOINTMENT OF VETERANS SERVICE ORGANIZATION  
AS CLAIMANT'S REPRESENTATIVE**

Note - If you would prefer to have an individual assist you with your claim, you may use VA Form 21-22a, "Appointment of Individual as Claimant's Representative." VA Forms are available at [www.va.gov/vaforms](http://www.va.gov/vaforms).

**IMPORTANT - PLEASE READ THE PRIVACY ACT AND RESPONDENT BURDEN ON REVERSE BEFORE COMPLETING THE FORM.**

1. LAST-FIRST-MIDDLE NAME OF VETERAN	2. VA FILE NUMBER (Include prefix)
3A. NAME OF SERVICE ORGANIZATION RECOGNIZED BY THE DEPARTMENT OF VETERANS AFFAIRS (See list on reverse side before selecting organization)	
3B. NAME AND JOB TITLE OF OFFICIAL REPRESENTATIVE ACTING ON BEHALF OF THE ORGANIZATION NAMED IN ITEM 3A (This is an appointment of the entire organization and does not indicate the designation of only this specific individual to act on behalf of the organization)	
3C. EMAIL ADDRESS OF THE ORGANIZATION NAMED IN ITEM 3A	

**INSTRUCTIONS - TYPE OR PRINT ALL ENTRIES**

4. SOCIAL SECURITY NUMBER (OR SERVICE NUMBER, IF NO SSN)	5. INSURANCE NUMBER(S) (Include letter prefix)	
6. NAME OF CLAIMANT (If other than veteran)	7. RELATIONSHIP TO VETERAN	
8. ADDRESS OF CLAIMANT (No. and street or rural route, city or P.O., State and ZIP Code)	9. CLAIMANT'S TELEPHONE NUMBERS (Include Area Code)	
	A. DAYTIME	B. EVENING
	10. EMAIL ADDRESS (If applicable)	
11. DATE OF THIS APPOINTMENT		

**12. AUTHORIZATION FOR REPRESENTATIVE'S ACCESS TO RECORDS PROTECTED BY SECTION 7332, TITLE 38, U.S.C.**  
By checking the box below I **authorize** VA to disclose to the service organization named on this appointment form any records that may be in my file relating to treatment for drug abuse, alcoholism or alcohol abuse, infection with the human immunodeficiency virus (HIV), or sickle cell anemia.

☐ I authorize the VA facility having custody of my VA claimant records to disclose to the service organization named in Item 3A all treatment records relating to drug abuse, alcoholism or alcohol abuse, infection with the human immunodeficiency virus (HIV), or sickle cell anemia. Redislosure of these records by my service organization representative, other than to VA or the Court of Appeals for Veterans Claims, is not authorized without my further written consent. This authorization will remain in effect until the earlier of the following events: (1) I revoke this authorization by filing a written revocation with VA; or (2) I revoke the appointment of the service organization named above, either by explicit revocation or the appointment of another representative.

**13. LIMITATION OF CONSENT - I authorize disclosure of records related to treatment for all conditions listed in Item 12 except:**

<input type="checkbox"/> DRUG ABUSE	<input type="checkbox"/> INFECTION WITH THE HUMAN IMMUNODEFICIENCY VIRUS (HIV)
<input type="checkbox"/> ALCOHOLISM OR ALCOHOL ABUSE	<input type="checkbox"/> SICKLE CELL ANEMIA

**14. AUTHORIZATION TO CHANGE CLAIMANT'S ADDRESS -** By checking the box below, I authorize the organization named in Item 3A to act on my behalf to change my address in my VA records.

☐ I authorize any official representative of the organization named in Item 3A to act on my behalf to change my address in my VA records. This authorization does not extend to any other organization without my further written consent. This authorization will remain in effect until the earlier of the following events: (1) I file a written revocation with VA; or (2) I appoint another representative, or (3) I have been determined unable to manage my financial affairs and the individual or organization named in Item 3A is not my appointed fiduciary.

I, the claimant named in Items 1 or 6, hereby appoint the service organization named in Item 3A as my representative to prepare, present and prosecute my claim(s) for any and all benefits from the Department of Veterans Affairs (VA) based on the service of the veteran named in Item 1. I authorize VA to release any and all of my records, to include disclosure of my Federal tax information (other than as provided in Items 12 and 13), to my appointed service organization. I understand that my appointed representative will not charge any fee or compensation for service rendered pursuant to this appointment. I understand that the service organization I have appointed as my representative may revoke this appointment at any time, subject to 38 CFR 20.608. *Additionally, in some cases a veteran's income is developed because a match with the Internal Revenue Service necessitated income verification. In such cases, the assignment of the service organization as the veteran's representative is valid for only five years from the date the claimant signs this form for purposes restricted to the verification match.* Signed and accepted subject to the foregoing conditions.

**THIS POWER OF ATTORNEY DOES NOT REQUIRE EXECUTION BEFORE A NOTARY PUBLIC**

15. SIGNATURE OF VETERAN OR CLAIMANT (Do Not Print)		16. DATE SIGNED	
17. SIGNATURE OF VETERANS SERVICE ORGANIZATION REPRESENTATIVE NAMED IN ITEM 3B (Do Not Print)		18. DATE SIGNED	
<b>VA USE ONLY</b>	COPY OF VA FORM 21-22 SENT TO:	DATE SENT	ACKNOWLEDGED (Date)
	<input type="checkbox"/> VR&E FILE <input type="checkbox"/> EDU FILE <input type="checkbox"/> LG FILE <input type="checkbox"/> INSURANCE FILE		
REVOKED (Reason and date)			

**NOTE:** As long as this appointment is in effect, the organization named herein will be recognized as the sole representative for preparation, presentation and prosecution of your claim before the Department of Veterans Affairs in connection with your claim or any portion thereof.

## RECOGNIZED SERVICE ORGANIZATIONS

Membership in an organization is not a prerequisite to appointment of the organization as claimant's representative.

The following is a listing of national, regional, or local organizations recognized by the Secretary of Veterans Affairs in the preparation, presentation, and prosecution of claims under laws administered by the Department of Veterans Affairs.

African American PTSD Association	National Association for Black Veterans, Inc.
American Legion	National Veterans Legal Services Program
American Red Cross	National Veterans Organization of America
AMVETS	Navy Mutual Aid Association
American Ex-Prisoners of War, Inc.	Paralyzed Veterans of America, Inc.
American GI Forum, National Veterans Outreach Program	Polish Legion of American Veterans, U.S.A.
Armed Forces Services Corporation	Swords to Plowshares, Veterans Rights Organization, Inc.
Army and Navy Union, USA	The Retired Enlisted Association
Associates of Vietnam Veterans of America	The Veterans Assistance Foundation, Inc.
Blinded Veterans Association	The Veterans of the Vietnam War, Inc. & The Veterans Coalition
Catholic War Veterans of the U.S.A.	United Spanish War Veterans of the United States
Disabled American Veterans	United Spinal Association, Inc.
Fleet Reserve Association	Veterans of Foreign Wars of the United States
Gold Star Wives of America, Inc.	Veterans of World War I of the U.S.A., Inc.
Italian American War Veterans of the United States, Inc.	Vietnam Era Veterans Association
Jewish War Veterans of the United States	Vietnam Veterans of America
Legion of Valor of the United States of America, Inc.	West Virginia Department of Veterans Assistance
Marine Corps League	Wounded Warrior Project
Military Officers Association of America (MOAA)	
Military Order of the Purple Heart	
National Amputation Foundation, Inc.	
National Association of County Veterans Service Officers, Inc.	

Although agency titles vary, the following States and possessions maintain veterans service agencies which are recognized to present claims.

Alabama	Hawaii	Minnesota	North Dakota	Tennessee
American Samoa	Idaho	Mississippi	Northern Mariana Islands	Texas
Arizona	Illinois	Missouri	Ohio	Utah
Arkansas	Iowa	Montana	Oklahoma	Vermont
California	Kansas	Nebraska	Oregon	Virginia
Colorado	Kentucky	Nevada	Pennsylvania	Virgin Islands
Connecticut	Louisiana	New Hampshire	Puerto Rico	Washington
Delaware	Maine	New Jersey	Rhode Island	West Virginia
Florida	Maryland	New Mexico	South Carolina	Wisconsin
Georgia	Massachusetts	New York	South Dakota	Wyoming
Guam	Michigan	North Carolina		

**PRIVACY ACT NOTICE:** VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of VA benefits, verification of identity and status, and personnel administration) as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records - VA, published in the Federal Register. Your obligation to respond is voluntary. However, the requested information is considered relevant and necessary to recognize a service organization as your representative and/or identify disclosable records. VA uses your SSN to identify your claim file. Providing your SSN will help ensure that your records are properly associated with your claim file. Giving us your SSN account information is voluntary. Refusal to provide your SSN by itself will not result in the denial of benefits. VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by Federal Statute of law in effect prior to January 1, 1975, and still in effect. The responses you submit are considered confidential (38 U.S.C. 5701). Information submitted is subject to verification through computer matching programs with other agencies.

**RESPONDENT BURDEN:** We need this information to recognize the service organization you name to act on your behalf in the preparation, presentation, and prosecution of claims for VA benefits (38 U.S.C. 5902). We will also use the information to identify any VA records that we may disclose to the service organization (38 U.S.C. 5701(b)). Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 5 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.





Department of Veterans Affairs

1. VA FILE NO(S) (Include prefix)

## APPOINTMENT OF INDIVIDUAL AS CLAIMANT'S REPRESENTATIVE

**Note - If you would prefer to have a service organization assist you with your claim, you may use VA Form 21-22, "Appointment of Veterans Service Organization As Claimant's Representative."**

**PRIVACY ACT NOTICE:** VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of VA benefits, verification of identity and status, and personnel administration) as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records-VA, published in the Federal Register. Your obligation to respond is voluntary. However, failure to respond provide the requested information could impede the recognition of your representative and/or identification of disclosable records. Except for information protected by 38 U.S.C. 7332, your representative is not prohibited from redisclosing records. The responses you submit are considered confidential (38 U.S.C. 5701). Information submitted is subject to verification through computer matching programs with other agencies.

**RESPONDENT BURDEN:** We need this information to recognize the individuals appointed by claimants to act on their behalf in the preparation, presentation, and prosecution of claims for VA benefits (38 U.S.C. 5902, 5903, and 5904) and for those individuals to accept appointment. We will also use the information to verify consent for disclosure of VA records to the appointed representative (38 U.S.C. 5701(b) and 7332) Title 38, United States Code, allows us to ask for this information. We estimate that claimants and individuals appointed for purposes of representation will each need an average of 5 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. A Valid OMB control number can be located on the OMB Internet Page at [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

2. NAME OF CLAIMANT (Veteran, guardian, beneficiary, dependent, or next of kin)

3. ADDRESS OF CLAIMANT (No. and street or rural route, city or P.O., State and ZIP Code)

4. LAST NAME - FIRST NAME - MIDDLE NAME OF VETERAN

5. SERVICE NUMBERS

6. BRANCH OF SERVICE

☐ ARMY ☐ NAVY ☐ AIR FORCE ☐ MARINE CORPS ☐ COAST GUARD ☐ OTHER (Specify \_\_\_\_\_)

7A. NAME OF INDIVIDUAL APPOINTED AS CLAIMANT'S REPRESENTATIVE

7B. INDIVIDUAL IS (check appropriate box)

☐ ATTORNEY ☐ AGENT ☐ INDIVIDUAL PROVIDING REPRESENTATION UNDER SECTION 14.630 ☐ SERVICE ORGANIZATION REPRESENTATIVE (Specify organization below)

(\*See required statement below. Signatures are required in Items 7C and 7D)

### \*INDIVIDUALS PROVIDING REPRESENTATION UNDER SECTION 14.630

(Skip to Item 8, if the box for "Individual Providing Representation Under Section 14.630" was not checked in Item 7B)

The appointment of the individual named in Item 7A (the representative) authorizes the individual to represent the claimant named in Item 2 for a particular claim pursuant to the provisions of 38 CFR 14.630. By our signatures below, we, the representative and the claimant, attest that no compensation will be charged or paid for the individual named in Item 7A.

7C. SIGNATURE OF REPRESENTATIVE NAMED IN ITEM 7A

7D. SIGNATURE OF CLAIMANT NAMED IN ITEM 2

8. ADDRESS OF INDIVIDUAL APPOINTED AS CLAIMANT'S REPRESENTATIVE (No. and street or rural route, city or P.O., State, and ZIP code)

**9. AUTHORIZATION FOR REPRESENTATIVE'S ACCESS TO RECORDS PROTECTED BY SECTION 7332, TITLE 38, U.S.C.**

Unless I check the box below, I do not authorize VA to disclose to the individual named in Item 7A any records that may be in my file relating to treatment for drug abuse, alcoholism or alcohol abuse, infection with the human immunodeficiency virus (HIV), or sickle cell anemia.

- ☐ I authorize the VA facility having custody of my VA claimant records to disclose to the individual named in Item 7A all treatment records relating to drug abuse, alcoholism or alcohol abuse, infection with the human immunodeficiency virus (HIV), or sickle cell anemia. Redisclosure of these records by my representative, other than to VA or the Court of Appeals for Veterans Claims, is not authorized without my further written consent. This authorization will remain in effect until the earlier of the following events: (1) I revoke this authorization by filing a written revocation with VA; or (2) I revoke the appointment of the individual named in Item 7A, either by explicit revocation or the appointment of another representative.

**10. LIMITATION OF CONSENT.** My consent in Item 9 for the disclosure of records relating to treatment for drug abuse, alcoholism or alcohol abuse, infection with the human immunodeficiency virus (HIV), or sickle cell anemia is limited as follows:**11. AUTHORIZATION FOR REPRESENTATIVE TO ACT ON CLAIMANT'S BEHALF TO CHANGE CLAIMANT'S ADDRESS**

Unless I check the box below, I do not authorize the individual named in Item 7A to act on my behalf to change my address in my VA records.

- ☐ I authorize the individual named in Item 7A to act on my behalf to change my address in my VA records. This authorization does not extend to any other individual with out my further written consent. This authorization will remain in effect until the earlier of the following events: (1) I revoke this authorization by filing a written revocation with VA; or (2) I revoke the appointment of the individual named in Item 7A, either by explicit revocation or the appointment of another representative.

**CONDITIONS OF APPOINTMENT**

I, the claimant named in Item 2, hereby appoint the individual named in Item 7A as my representative to prepare, present, and prosecute my claims for any and all benefits from the Department of Veterans Affairs (VA) based on the service of the veteran named in Item 4. If the individual named in Item 7A is an accredited agent or attorney, the scope of representation provided before VA may be limited by the agent or attorney as indicated below in Item 15. If the individual indicated in Item 7A is providing representation under 14.630, such representation is limited to a particular claim only. I authorize VA to release any and all of my records (other than as provided in Items 9 and 10) to that individual appointed as my representative, and if the individual in Item 7A is an accredited agent or attorney, this authorization includes the following individually named administrative employees of my representative:

Signed and accepted subject to the foregoing conditions.

12. SIGNATURE OF CLAIMANT

13. DATE OF SIGNATURE

14. CLAIMANT'S RELATIONSHIP TO VETERAN  
(If other than the veteran)

**15. LIMITATIONS ON REPRESENTATION - AGENTS OR ATTORNEYS ONLY** (Unless limited by an agent or attorney, this power of attorney revokes all previously existing powers of attorney)

16. SIGNATURE OF REPRESENTATIVE

17. DATE OF SIGNATURE

**FEES:** Section 5904, Title 38, United States Code, contains provisions regarding fees that may be charged, allowed, or paid for services of agents or attorneys in connection with a proceeding before the Department of Veterans Affairs with respect to benefits under laws administered by the Department.



## INFORMATION AND INSTRUCTIONS TO HELP YOU COMPLETE THE AUTHORIZATION TO DISCLOSE PERSONAL INFORMATION TO A THIRD PARTY

### GENERAL INFORMATION

At VA, we recognize and respect the importance of privacy. Personal information that we collect is kept confidential to the extent provided by law. In accordance with the Privacy Act and applicable confidentiality statutes, VA will only disclose the information in its custody or control in the following circumstances: where the individual identifies the particular information and consents to its use; where disclosure of the information is required by law; or where the disclosure is otherwise legally permitted, including release for a purpose compatible with the purpose for which it was collected.

By law, VA must have your written permission (an "authorization") to use or give out your claim or benefit information for any purpose that is not permitted by all applicable legal authorities. You may revoke your written permission at any time, except if VA has already acted based on your permission.

### SPECIFIC INSTRUCTIONS

#### Questions 1 - 5

In this section, give us the veteran's identification information to include name, social security number, VA file number, date of birth and the veteran's service number, if applicable.

#### Questions 6 - 9

In this section provide the beneficiary/claimant's identification information.

#### Questions 10 - 13

This section tells VA the duration of your consent. If you do not want your authorization to be effective indefinitely, tell us when to stop releasing your personal benefit or claim information to your authorized third party in Item 12. Check the box that applies and fill in dates, if applicable.

In Item 13 VA will give your personal benefit or claim information to the person or organization you fill in here. You may select only **one person** or **one organization**. If you designate an organization, you must also identify one or more individuals in that organization to whom VA may disclose your benefit or claim information. This form **cannot** be used to disclose federal tax information to third parties.

**Important:** The information provided in Item 6, "Name of Beneficiary/Claimant Who Is Not the Veteran" cannot be the same information provided in Item 13.

#### Question 14

Select the security question you would like us to ask your designated third party and provide the answer. This question will be asked each time your designated third party contacts our office.

#### Where Do I Send My Completed Form?

You can obtain the mailing address or fax number to send your completed, signed authorization on page 4 of this form.

You should make a copy of your signed authorization for your records before mailing or faxing it to VA. You can only have one active VA Form 21-0845 on file with VA at a time.

#### WHAT IF I CHANGE MY MIND?

If you change your mind and do not want VA to give out your personal benefit or claim information, you may notify us in writing, or by telephone at 1-800-827-1000 or electronically via the Internet at <https://iris.custhelp.com/>. Upon notification from you VA will no longer give out benefit or claim information (except for the information VA has already given out based on your permission).



VETERAN'S SSN

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**SECTION III - CONTACT INFORMATION (Continued)**

14. SPECIFY THE SECURITY QUESTION YOU WANT USED WHEN VERIFYING THE IDENTITY OF YOUR DESIGNATED THIRD PARTY.  
CHECK ONLY **ONE** SECURITY QUESTION BOX IN 14A AND PROVIDE THE ANSWER IN 14B.

A. SECURITY QUESTION	B. ANSWER
<input type="checkbox"/> The city and state your mother was born in	
<input type="checkbox"/> The name of the high school you attended	
<input type="checkbox"/> Your first pet's name	
<input type="checkbox"/> Your favorite teacher's name	
<input type="checkbox"/> Your father's middle name	

**SECTION IV - DECLARATION OF INTENT**

I CERTIFY THAT the statements on this form are true and correct to the best of my knowledge and belief.

15A. SIGNATURE (*Do NOT print*)15B. DATE SIGNED (*MM,DD,YYYY*)

WHERE TO SEND YOUR VA FORM 21-0845	MAIL TO	FAX TO
	<b>Department of Veterans Affairs</b> <b>Evidence Intake Center</b> <b>PO Box 4444</b> <b>Janesville, WI 53547-4444</b>	<b>844-531-7818 (Toll Free) OR</b> <b>Local: 248-524-4260</b>

**PRIVACY ACT INFORMATION:** VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or title 38, Code of Federal Regulations 1.576 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of VA benefits, verification of identity and status, and personnel administration as identified in the VA system of records, 58VA21/22/28 Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records - VA, published in the Federal Register. Your obligation to respond is voluntary. VA uses your SSN to identify your claim file. Providing your SSN will help ensure that your records are properly associated with your claim file. Giving us your SSN account information is voluntary. Refusal to provide your SSN by itself will not result in the denial of benefits. The VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by Federal Statute of law in effect prior to January 1, 1975, and still in effect.

**RESPONDENT BURDEN:** We need this information to release your private benefit and/or claim information to a designated third party(ies). The execution of this form does not authorize the release of information other than that specifically described. The information requested on this form will authorize release of the information you specify. Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 5 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.



Department of Veterans Affairs

**VA DATE STAMP**  
(DO NOT WRITE IN THIS SPACE)

**INTENT TO FILE A CLAIM FOR COMPENSATION AND/OR PENSION,  
OR SURVIVORS PENSION AND/OR DIC**  
(This Form Is Used to Notify VA of Your Intent to File for the General Benefit(s) Checked Below)

**NOTE:** Please read the Privacy Act and Respondent Burden below before completing the form.

**SECTION I: CLAIMANT/VETERAN IDENTIFICATION**

**NOTE:** You can *either* complete the form online or by hand. If completed by hand, print the information requested in ink, neatly and legibly to expedite processing of the form.

1. CLAIMANT'S NAME (First, Middle Initial, Last)		
<input type="text"/>		
2. CLAIMANT'S SOCIAL SECURITY NUMBER	3. VA FILE NUMBER (If applicable)	4. VETERAN'S DATE OF BIRTH (MM,DD,YYYY) Month Day Year
<input type="text"/>	<input type="text"/>	<input type="text"/>
5. VETERAN'S NAME (First, Middle Initial, Last) (If different from claimant)		
<input type="text"/>		
6. VETERAN'S SOCIAL SECURITY NUMBER	7. VETERAN'S SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	8. VETERAN'S SERVICE NUMBER (If applicable)
<input type="text"/>	<input type="text"/>	<input type="text"/>
9. CURRENT MAILING ADDRESS (Number and street or rural route, P.O. Box, City, State, ZIP Code and Country)		
No. & Street <input type="text"/>		
Apt./Unit Number <input type="text"/>	City <input type="text"/>	
State/Province <input type="text"/>	Country <input type="text"/>	ZIP Code/Postal Code <input type="text"/>
10. HAS THE VETERAN EVER FILED A CLAIM WITH VA? <input type="checkbox"/> YES <input type="checkbox"/> NO	11. TELEPHONE NUMBER (Include Area Code)	12. EMAIL ADDRESS (If applicable)
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SECTION II: GENERAL BENEFIT ELECTION**

**IMPORTANT:** VA may not be able to use this form to establish an effective date for benefits if you **do not** select one or more of the general benefits listed below.

**13. I intend to file for the general benefit(s) checked below: (Choose all that apply)**

☐ COMPENSATION ☐ PENSION

**NOTE:** Only check the box below if you are a surviving dependent of the veteran.

☐ SURVIVORS PENSION AND/OR DEPENDENCY AND INDEMNITY COMPENSATION (DIC)

**IMPORTANT:** After receiving this form, VA will give you the appropriate application to file for the general benefit you select above. You can also apply for VA disability compensation online through eBenefits at [www.ebenefits.va.gov](http://www.ebenefits.va.gov). If you give VA a completed application for the selected general benefit within **one** year of filing this form, your completed application will be considered filed as of the date of receipt of this form. Only the **first** completed application for each selected general benefit that is received after you file this form will be considered filed as of the date of receipt of this form. You may indicate your intent to file for more than one general benefit on this form or you may submit a separate intent to file for each general benefit. Please complete as many fields in Section II as possible. VA cannot process this form if we cannot identify the claimant and veteran.

**SECTION III: DECLARATION OF INTENT**

By filing this form, I hereby indicate my intent to apply for one or more general benefits under the laws administered by VA. I acknowledge that: (1) this is **not a claim for benefits**; (2) I must file a complete application for each general benefit with VA before VA will process my claim; and (3) a complete application for the same general benefit(s) as indicated on this form must be received within one year of the date VA receives this form for my application to be considered filed as of the date of this form.

14A. SIGNATURE OF CLAIMANT/AUTHORIZED REPRESENTATIVE	14B. DATE SIGNED (MM,DD,YYYY)
<input type="text"/>	<input type="text"/>

15. NAME OF ATTORNEY, AGENT, OR VETERANS SERVICE ORGANIZATION (Please Print)  
(NOTE: This form may only be completed by a Veterans Service Organization, attorney, or agent if a valid power of attorney has been completed.)

**PRIVACY ACT NOTICE:** VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of benefits, verification of identity and status, and personnel administration) as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records - VA, published in the Federal Register. Your obligation to respond is required only to preserve a date of claim for an application that is received within one year of receipt of this form. VA uses your Social Security number to identify if you have a claim file and to ensure that your records are properly associated with your claim file. VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by Federal Statute of law in effect prior to January 1, 1975, and still in effect. The requested information is considered relevant and necessary to determine the appropriate application and provide it to the claimant.

**RESPONDENT BURDEN:** We need this information to determine and to provide the claimant with the appropriate application for VA benefits (38 U.S.C. 5102). Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 15 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.



## Department of Veterans Affairs

### NOTICE TO VETERAN/SERVICE MEMBER OF EVIDENCE NECESSARY TO SUBSTANTIATE A CLAIM FOR VETERANS DISABILITY COMPENSATION AND RELATED COMPENSATION BENEFITS

This notice provides information regarding the evidence necessary to substantiate a claim for:

- Disability Service Connection
- Compensation Claims Submitted Prior to Discharge
- Compensation under 38 U.S.C. 1151
- Automobile Allowance/Adaptive Equipment
- Secondary Service Compensation
- Temporary Total Disability Rating
- Special Monthly Compensation
- Benefits Based on a Veteran's Seriously Disabled Child
- Increased Disability Compensation
- Individual Unemployability
- Specially Adapted Housing/Special Home Adaptation

Use this notice and the attached application to submit a claim for veterans' disability compensation and related compensation benefits. This notice informs you of the evidence necessary to decide your claim. After you submit your claim on the attached application you **will not** receive an initial letter regarding your claim. You **do not** need to submit another application.

**Want to apply electronically?** You can apply for VA disability compensation and pension online through eBenefits at [www.ebenefits.va.gov](http://www.ebenefits.va.gov). For disability compensation claims, you can also upload all supporting evidence you may have and make your claim a Fully Developed Claim (FDC). To file a claim for VA disability compensation electronically, go to eBenefits, select Apply for Benefits and then Apply for Disability Compensation. You will need to create an eBenefits account to apply for disability compensation online. To file a claim for VA pension electronically, go to eBenefits, select Apply for Benefits, and then select Apply for Veterans Benefits via VONAPP. Once you submit your claim, you can track the status using eBenefits.

**NOTE:** You may wish to contact an accredited veterans service officer (VSO) to assist you with your application. For a list of accredited veterans service organizations go to <https://www.va.gov/vso/>. You may also contact your state office of veterans affairs at <https://www.va.gov/statedva.htm>, should you need further assistance with the application process.

**Want your claim processed faster?** The FDC Program is the **fastest** way to get your claim processed and there is no risk to participate! To participate in the FDC Program, if you are making a claim for veterans disability compensation or related compensation benefits, simply submit your claim in accordance with the "FDC Criteria" shown below. If you are making a claim for veterans non service-connected pension benefits, use VA Form 21P-527EZ, *Application for Pension*. If you are making a claim for survivor benefits, use VA Form 21P-534EZ, *Application for DIC, Death Pension, and/or Accrued Benefits*. VA forms are available at [www.va.gov/vaforms](http://www.va.gov/vaforms). A separate expedited claims processing program available for current active duty Servicemembers is explained on page 5 under *Compensation Claims Submitted Prior to Discharge*.

**NOTE:** Participation in the FDC Program is optional and will not affect the benefits to which you are entitled. If you file a claim in the FDC Program and it is determined that other records exist and VA needs the records to decide your claim, then VA will simply remove the claim from the FDC Program (Optional Expedited Process) and process it in the Standard Claim Process. See below for more information. If you wish to file your claim in the FDC Program, see FDC Program (Optional Expedited Process). If you wish to file your claim under the process in which VA traditionally processes claims, see Standard Claim Process.

#### SUBMITTING A CLAIM

When submitting a claim(s) for **Veterans Disability Compensation and Related Compensation Benefits** the following information tells you what you need to do and what VA will do during the FDC Program (Optional Expedited Process) or the Standard Claim Process:

##### 1. HOW TO SUBMIT A CLAIM

Submit your claim on a VA Form 21-526EZ, *Application for Disability Compensation and Related Compensation Benefits* (Attached). Make sure you complete and sign your application.

##### 2. WHAT YOU NEED TO DO

The table on page 2 describes the information and evidence you need to submit based on whether you wish to have your claim considered in the FDC Program (Optional Expedited Process) or in the Standard Claim Process. You will need to indicate how you want your claim to be processed by checking the appropriate box in Item 1, on page 8 of this form.

FDC Program (Optional Expedited Process)	Standard Claim Process
<p><b>You must:</b></p> <ul style="list-style-type: none"> <li>• Submit all relevant private treatment records, if they exist</li> <li>• Identify any relevant treatment records available at a Federal Facility, such as a VA medical center</li> <li>• Identify the location and sufficient information to obtain your National Guard and Reserve personnel and service treatment records <i>(if applicable)</i></li> </ul> <p>If your claim involves a disability that you had before entering service and that was made worse by service, please provide any information or evidence in your possession regarding the health condition that existed before your entry into service.</p> <p><b>NOTE:</b> If you decide to submit your claim through the FDC Program, please indicate FDC in Item 1 of the application on page 8.</p>	<p>If you know of evidence not in your possession and want VA to try to get it for you;</p> <p><b>You must:</b></p> <ul style="list-style-type: none"> <li>• Complete and sign VA Form 21-4142, <i>Authorization to Disclose Information to the Department of Veterans Affairs (VA)</i> and VA Form 21-4142a, <i>General Release for Medical Provider Information to the Department of Veterans Affairs (VA)</i>, identifying any private medical records you wish VA to request for you</li> <li>• Give VA enough information about other relevant evidence so that we can request it from the person or agency that has it</li> </ul> <p>If the holder of the evidence declines to give it to VA, asks for a fee to provide it, or otherwise cannot get the evidence, VA will notify you and provide you with an opportunity to submit the information or evidence. <b><i>It is your responsibility to make sure we receive all requested records that are not in the possession of a Federal department or agency.</i></b></p> <p>If your claim involves a disability that you had before entering service and that was made worse by service, please provide any information or evidence in your possession regarding the health condition that existed before your entry into service.</p>
<p><b>You must:</b></p> <ul style="list-style-type: none"> <li>• Send the information and evidence <i>along</i> with your claim</li> </ul> <p>If you submit additional information or evidence <i>after</i> you submit your "fully developed" claim, then VA will remove the claim from the FDC Program (Optional Expedited Process) and process it in the Standard Claim Process. If we decide your claim before one year from the date we receive the claim, you will still have the remainder of the one-year period to submit additional information or evidence necessary to support the claim.</p>	<p><b>You are strongly encouraged to:</b></p> <ul style="list-style-type: none"> <li>• Send any information or evidence as soon as you can</li> </ul> <p><b>You have up to one year</b> from the date we receive the claim to submit the information and evidence necessary to support your claim. If within <b>30</b> days, you do not provide any evidence or do not provide us with the information needed to assist you with obtaining evidence, we may decide your claim prior to the expiration of the one year period. If we decide the claim before one year from the date we receive the claim, you will still have the remainder of the one year period to submit additional information or evidence necessary to support the claim.</p>
<p>If any of the special circumstances in the table below titled "<b><i>Special Circumstances</i></b>" applies to you;</p> <p><b>You must:</b></p> <ul style="list-style-type: none"> <li>• Send the information and evidence identified in the "<b><i>Special Circumstances</i></b>" table below at the same time as your claim</li> </ul>	<p>If any of the special circumstances in the table below titled "<b><i>Special Circumstances</i></b>" applies to you;</p> <p><b>You are strongly encouraged to:</b></p> <ul style="list-style-type: none"> <li>• Send the information and evidence identified in the "<b><i>Special Circumstances</i></b>" table below at the same time as your claim. If you do not submit the needed information or evidence with your claim but it is needed to make a decision, VA will request it from you.</li> </ul>

### SPECIAL CIRCUMSTANCES

Under the special circumstances shown below, you ***must*** also submit along with your claim the following:

- **If you were treated at a Veterans Center**, submit a completed VA Form 21-4142
- **If claiming dependents**, submit a completed VA Form 21-686c, *Declaration of Status of Dependents*. If claiming a child in school between the ages of 18 and 23; also submit a completed VA Form 21-674, *Request for Approval of School Attendance*. If claiming benefits for a seriously disabled (helpless) child, also submit all, relevant, private medical treatment records pertaining to the child's pertinent disabilities
- **If claiming Individual Unemployability**, submit a completed VA Form 21-8940, *Veteran's Application for Increased Compensation Based on Unemployability*
- **If claiming Post-Traumatic Stress Disorder (PTSD)**, submit a completed VA Form 21-0781, *Statement in Support of Claim for Service Connection for Post-Traumatic Stress Disorder*, or if claiming PTSD based on personal assault, submit a completed VA Form 21-0781a, *Statement in Support of Claim for Service Connection for Post-Traumatic Stress Disorder Secondary to Personal Assault*



### SPECIAL CIRCUMSTANCES (Continued)

Under the special circumstances shown below, you must also submit along with your claim the following:

- **If claiming Specially Adapted Housing or Special Home Adaptation**, submit a completed VA Form 26-4555, *Application in Acquiring Specially Adapted Housing or Special Home Adaptation Grant*
- **If claiming Auto Allowance**, submit a completed VA Form 21-4502, *Application for Automobile or Other Conveyance and Adaptive Equipment*
- **If claiming additional benefits because you or your spouse require Aid and Attendance**, submit a completed VA Form 21-2680, *Examination for Housebound Status or Permanent Need for Regular Aid and Attendance*; or if claiming Aid and Attendance based on nursing home attendance, a VA Form 21-0779, *Request for Nursing Home Information in Connection with Claim for Aid and Attendance*

**NOTE:** VA forms are available online at [www.va.gov/vaforms](http://www.va.gov/vaforms).

### 3. HOW VA WILL HELP YOU OBTAIN EVIDENCE FOR YOUR CLAIM

The table below describes the information and evidence VA will assist you in obtaining based on whether you wish to have your claim considered in the FDC Program (Optional Expedited Process) or in the Standard Claim Process.

FDC Program (Optional Expedited Process)	Standard Claim Process
<b>VA will:</b> <ul style="list-style-type: none"> <li>Retrieve relevant records from a Federal facility, such as a VA medical center, that you adequately identify and authorized VA to obtain</li> <li>Provide a medical examination for you, or get a medical opinion, if we determine it is necessary to decide your claim</li> </ul>	<b>VA will:</b> <ul style="list-style-type: none"> <li>Retrieve relevant records from a Federal facility, such as a VA medical center, that you adequately identify and authorized VA to obtain</li> <li>Provide a medical examination for you, or get a medical opinion, if we determine it is necessary to decide your claim</li> <li>Make every reasonable effort to obtain relevant records not held by a Federal facility that you adequately identify and authorize VA to obtain. These may include records from State or local governments and privately held evidence and information you tell us about, such as a private doctor or hospital records from current or former employers</li> </ul>

### 4. WHERE TO SEND INFORMATION AND EVIDENCE

You may send your application and any evidence in support of your claim by using any of the following methods shown in the table below.

MAIL TO	FAX TO	ONLINE
<b>Department of Veterans Affairs</b> <b>Evidence Intake Center</b> <b>PO Box 4444</b> <b>Janesville, WI 53547-4444</b>	<b>844-531-7818 (Toll Free) OR</b> <b>For Foreign Claims 248-524-4260</b>	<a href="http://www.ebenefits.va.gov">www.ebenefits.va.gov</a>

### 5. WHAT THE EVIDENCE MUST SHOW TO SUPPORT YOUR CLAIM

The table below provides a guide to the evidence tables showing what evidence you must provide to support your claim.

If you are claiming...	See the evidence table titled...
You have a disability that was caused or aggravated by your service	Disability Service Connection
Your service connected disability caused or aggravated an additional disability	Secondary Service Connection
Your service connected disability has worsened	Increased Disability Compensation
Compensation and you are a serviceperson who is about to be discharged	Compensation Claims Submitted Prior to Discharge
Your service connected disability caused you to be hospitalized or to undergo surgery or other treatment	Temporary Total Disability Rating
Your service connected disability(ies) prevents you from getting or keeping substantial employment	Individual Unemployability
You have a disability caused or aggravated by VA medical treatment, vocational rehabilitation, or compensated work therapy	Compensation Under 38 U.S.C. 1151
Your service connected disability (ies) causes you to be in need of aid and attendance or to be confined to your residence	Special Monthly Compensation
Adapting and/or purchasing a residence	Special Adapted Housing or Special Home Adaptation
Adapting and/or purchasing a vehicle	Auto Allowance
A Severely Disabled Spouse	Special Monthly Compensation
A Severely Disabled Child	Helpless Child

## EVIDENCE TABLES

### Disability Service Connection

To support a claim for **service connection**, the evidence must show:

- You had an injury in service, or a disease that began in or was made permanently worse during service, or there was an event in service that caused an injury or disease; **AND**
- You have a current physical or mental disability. This may be shown by medical evidence or by lay evidence of persistent and recurrent symptoms of disability that are visible or observable; **AND**
- A relationship exists between your current disability and an injury, disease, symptoms, or event in service. This may be shown by medical records or medical opinions or, in certain cases, by lay evidence.

However, under certain circumstances, VA may presume that certain current disabilities were caused by service, even if there is no specific evidence proving this in your particular claim. The cause of a disability is presumed for the following veterans who have certain diseases:

- Former prisoners of war;
- Veterans who have certain chronic or tropical diseases that become evident within a specific period of time after discharge from service;
- Veterans who were exposed to ionizing radiation, mustard gas, or Lewisite while in service;
- Veterans who were exposed to certain herbicides, such as by serving in Vietnam; or
- Veterans who served at Camp Lejeune for no less than 30 days (consecutive or nonconsecutive) between August 1, 1953 and December 31, 1987; or
- Veterans who served in the Southwest Asia theater of operations during the Gulf War.

To support a claim for **service connection based upon a period of active duty for training**, the evidence must show:

- You were disabled during active duty for training due to disease or injury incurred or aggravated in the line of duty; **AND**
- You have a current physical or mental disability. This may be shown by medical evidence or by lay evidence of persistent and recurrent symptoms of disability that are visible or observable; **AND**
- There is a relationship between your current disability and the disease or injury incurred or aggravated during active duty for training. This may be shown by medical records or medical opinions or, in certain cases, by lay evidence.

To support a claim for **service connection based upon a period of inactive duty training**, the evidence must show:

- You were disabled during inactive duty training due to an injury incurred or aggravated in the line of duty or an acute myocardial infarction, cardiac arrest, or cerebrovascular accident during inactive duty training; **AND**
- You have a current physical or mental disability. This may be shown by medical evidence or by lay evidence of persistent and recurrent symptoms of disability that are visible or observable; **AND**
- There is a relationship between your current disability and your inactive duty training. This may be shown by medical records or medical opinions or, in certain cases, by lay evidence.

In order to **reopen a claim previously denied** by VA, we need new and material evidence. New and material evidence must raise a reasonable possibility of substantiating your claim. The evidence cannot simply be repetitive or cumulative of the evidence we had when we previously decided your claim. VA will make reasonable efforts to help you obtain currently existing evidence. However, we cannot provide a medical examination or obtain a medical opinion until your claim is successfully reopened.

- To qualify as new, the evidence must currently exist and be submitted to VA for the first time.
- In order to be considered material, the additional existing evidence must pertain to the reason your claim was previously denied.

### Secondary Service Connection

To support a claim for **compensation based upon an additional disability** that was caused or aggravated by a service-connected disability, the evidence must show:

- You currently have a physical or mental disability shown by medical evidence or by lay evidence of persistent and recurrent symptoms of disability that are visible or observable, in addition to your service-connected disability; **AND**
- Your service-connected disability either caused or aggravated your additional disability. This may be shown by medical records or medical opinions or, in certain cases, by lay evidence. However, VA may presume service-connection for cardiovascular disease developing in a claimant with certain service-connected amputation(s) of one or both lower extremities.

### Increased Disability Compensation

If VA previously granted service connection for your disability and you are seeking an **increased evaluation** of your service-connected disability, we need medical or lay evidence to show a worsening or increase in severity and the effect that worsening or increase has on your ability to work.

## EVIDENCE TABLES (Continued)

### Compensation Claims Submitted Prior to Discharge

Under the Benefits Delivery at Discharge (BDD) program you can submit a disability claim 90 to 180 days prior to your anticipated separation date from active duty. Claims are accepted from active duty Servicemembers, including reservists serving on active duty in an Active Guard Reserve (AGR) role under 10 U.S.C. and full-time National Guard members serving in an AGR role under 32 U.S.C.

BDD program participants can have their VA medical examinations conducted while they are still on active duty. You are encouraged to file your claim as close to the 180 day mark as possible to ensure your examinations can be scheduled and completed prior to your discharge from active duty. The BDD program requires that Servicemembers be available to report for examinations for 45 days following submission of a disability claim. Claims and additional contentions received with less than 90 days remaining on active duty, claim types that are excluded from the BDD program, or where the Servicemember is unable to report for an examination within the BDD required time frame will be processed under the standard VA claims process, the Fully Developed Claim (FDC) program or any other qualifying program.

**BDD Program Criteria for Claim(s) for Disability Compensation and Related Compensation Benefits Submitted Prior to Separation from Active Duty:**

- be within 90 to 180 days of discharge;
- be available to report for examinations for 45 days following the submission of a disability claim;
- provide an anticipated release from active duty date, *and*
- complete a VA Form 21-526EZ, *Application for Disability Compensation and Related Compensation Benefits*

### Temporary Total Disability Rating

In order to support a claim for a **temporary total disability rating due to hospitalization**, the evidence must show:

- You were treated for more than 21 days for a service-connected disability at a VA or other approved hospital; **OR**
- You underwent hospital observation at VA expense for a service-connected disability for more than 21 days.

**In order to support a claim for a temporary total disability rating due to surgical or other treatment** performed by a VA or other approved hospital or outpatient facility, the evidence must show:

- The surgery or treatment was for a service-connected disability; **AND**
- The surgery required convalescence of at least one month; **OR**
- The surgery resulted in severe postoperative residuals, such as incompletely healed surgical wounds, stumps of recent amputations, therapeutic immobilizations, house confinement, or the required use of a wheelchair or crutches; **OR**
- One major joint or more was immobilized by a cast without surgery.

### Individual Unemployability

In order to support a claim for a **total disability rating based on individual unemployability**, the evidence must show:

- That your service-connected disability or disabilities are sufficient, without regard to other factors, to prevent you from performing the mental and/or physical tasks required to get or keep substantially gainful employment; **AND**
- Generally, you meet certain disability percentage requirements as specified in 38 Code of Federal Regulations 4.16 (i.e. one disability ratable at 60 percent or more, **OR** more than one disability with one disability ratable at 40 percent or more and a combined rating of 70 percent or more).

In order to support a claim for an **extra-schedular evaluation based on exceptional circumstances**, the evidence must show:

- That your service-connected disability or disabilities present such an exceptional or unusual disability picture, due to such factors as marked interference with employment or frequent periods of hospitalization, that application of the regular schedular standards is impractical.

### Compensation Under 38 U.S.C. 1151

In order to support a claim for **compensation under 38 U.S.C. 1151**, the evidence must show that, as a result of VA hospitalization, medical or surgical treatment, examination, or training, you have:

- An additional disability or disabilities; **OR**
- An aggravation of an existing injury or disease; **AND**
- The disability was the direct result of VA fault such as carelessness, negligence, lack of proper skill, or error in judgment, or not a reasonably expected result or complication of the VA care or treatment; **OR**
- The direct result of participation in a VA Vocational Rehabilitation and Employment or compensated work therapy program.

## EVIDENCE TABLES (Continued)

### Special Monthly Compensation

In order to support a claim for **increased benefits based on the need for aid and attendance**, the evidence must show that, due to your service-connected disability or disabilities:

- You require the aid of another person in order to perform personal functions required in everyday living, such as bathing, feeding, dressing yourself, attending to the wants of nature, adjusting prosthetic devices, or protecting yourself from the hazards of your daily environment (38 Code of Federal Regulation 3.352(a)); **OR**
- You are bedridden, in that your disability or disabilities requires that you remain in bed apart from any prescribed course of convalescence or treatment (38 Code of Federal Regulation 3.352(a)).

In order to support a claim for **increased benefits based on an additional disability or being housebound**, the evidence must show:

- You have a single service-connected disability evaluated as 100 percent disabling **AND** an additional service-connected disability, or disabilities, evaluated as 60 percent or more disabling; **OR**
- You have a single service-connected disability evaluated as 100 percent disabling **AND**, due solely to your service-connected disability or disabilities, you are permanently and substantially confined to your immediate premises.

In order to support a claim for **increased benefits based on your spouse's need for aid and attendance**, per the provisions of 38 C.F.R. § 3.351(c), the evidence must show:

- Your spouse is blind or so nearly blind as to have corrected visual acuity of 5/200 or less, in both eyes, or concentric contraction of the visual field to 5 degrees or less; **OR**
- Your spouse is a patient in a nursing home because of mental or physical incapacity; **OR**
- Your spouse requires the aid of another person in order to perform personal functions required in everyday living, such as bathing, feeding, dressing, attending to the wants of nature, adjusting prosthetic devices, or protecting him or her from the hazards of his or her daily environment (See 38 C.F.R. § 3.352(a) for complete explanation).

**IMPORTANT:** For additional benefits to be payable for a spouse, the veteran must be entitled to compensation and evaluated as 30 percent or more disabling.

### Specially Adapted Housing or Special Home Adaptation

To support your claim for **specially adapted housing (SAH)**, the evidence must show you are a:

- Veteran entitled to compensation under 38 U.S.C. Chapter 11 for a permanent and totally disabling qualifying condition; **OR**
- Servicemember on active duty who has a permanent and totally disabling qualifying condition incurred or aggravated in the line of duty.

To support that you have a **qualifying condition for SAH** the evidence must show:

- Amyotrophic lateral sclerosis (ALS); **OR**
- Loss (amputation) or loss of use of:
  - *both* lower extremities; **OR**
  - *one* lower extremity **and** *one* upper extremity affecting balance **or** propulsion; **OR**
  - *one* lower extremity **plus** residuals of organic disease or injury affecting balance or propulsion creating a need for regular, constant use of a wheelchair, braces, crutches or canes as a normal mode of getting around (although getting around by other methods may occasionally be possible); **OR**
- Loss or loss of use of *both* upper extremities precluding use of the arms at or above the elbow; **OR**
- Blindness in *both* eyes, with light perception only **and** the loss or loss of use of one lower extremity; **OR**
- A severe burn injury, meaning full thickness or sub-dermal burns that have resulted in contractures with limitation of motion of:
  - *two or more* extremities; **OR**
  - *at least one* extremity **and** the trunk.

To support your claim for **SAH** the evidence may alternatively show you are a:

- Veteran who served and became permanently disabled from a qualifying condition on or after September 11, 2001; **OR**
- Servicemember on active duty who was permanently disabled in the line of duty from a qualifying condition on or after the same date.

To support that you have a **qualifying condition under the alternative service criteria** the evidence must show:

- Loss (amputation) or loss of use of:
  - *one or more* lower extremities, severely affecting the functions of balance or propulsion and creating a need for regular, constant use of a wheelchair, braces, crutches or canes as a normal mode of getting around (although getting around by other methods may occasionally be possible).

To support your claim for a **special home adaptation (SHA) grant** the evidence must show you are a:

- Veteran entitled to compensation under 38 U.S.C. Chapter 11 for a qualifying condition; **OR**
- Servicemember on active duty who has a qualifying condition incurred or aggravated in the line of duty.

## EVIDENCE TABLES (Continued)

### Specially Adapted Housing or Special Home Adaptation (Continued)

To support that you have a **qualifying condition for SHA** the evidence must show:

- the loss, or permanent loss of use, of at least a foot or a hand; **OR**
- Blindness with central visual acuity of 20/200 or worse in each eye using a standard correcting lens; **OR**
- Blindness such that the visual field in each eye subtends an angle no greater than 20 degrees; **OR**
- Permanent **and** total disability from loss, **or** loss of use, of *both* hands; **OR**
- Permanent **and** total disability from a severe burn injury meaning
  - deep partial thickness burns that have resulted in contractures with limitation of motion of *two or more* extremities **or** of *at least one* extremity **and** the trunk; **OR**
  - full thickness **or** sub-dermal burns that have resulted in contracture(s) with limitation of motion of *one or more* extremities **or** the trunk; **OR**
  - residuals of inhalation injury (including, but not limited to, pulmonary fibrosis, asthma, and chronic obstructive pulmonary disease).

### Auto Allowance

To support a claim for **automobile allowance or adaptive equipment**, the evidence must show that you have a service-connected disability resulting in:

- (1) the loss, or permanent loss of use, of at least a foot or a hand; **OR**
- (2) permanent impairment of vision of both eyes, resulting in:
  - (a) vision of 20/200 or less in the better eye with corrective glasses; **OR**
  - (b) vision of 20/200 or better, if there is a severe defect in your peripheral vision; **OR**
- (3) deep partial thickness or full thickness burns resulting in scar formation that cause contractures and limit motion of one or more extremities of the trunk and preclude effective operation of an automobile; **OR**
- (4) amyotrophic lateral sclerosis (ALS).

**NOTE** - You may be entitled to **only** adaptive equipment if you have ankylosis ("freezing") of at least one knee or one hip due to service-connected disability. Medical evidence, including a VA examination, will show these things. VA will provide an examination if it determines that one is necessary.

### Helpless Child

To support a claim for **benefits based on a veteran's child being helpless**, the evidence must show that the child, before his or her 18th birthday, became permanently incapable of self-support due to a mental or physical disability.

**IMPORTANT:** For additional benefits to be payable for a child, the veteran must be entitled to compensation and evaluated as 30 percent or more disabling.

## HOW VA DETERMINES THE EFFECTIVE DATE.

If we grant your claim, the beginning date of your entitlement or increased entitlement to benefits will generally be based on the following factors:

- When we received your claim, **OR**
- When the evidence shows a level of disability that supports a certain rating under the rating schedule

If VA received your claim prior to or within one year of your separation from the military, entitlement will be from the day following the date of your separation as long as the disability was present at that time.

## HOW VA DETERMINES THE DISABILITY RATING.

When we find disabilities to be service-connected, we assign a disability rating. That rating can be changed if there are changes in your condition. Depending on the disability involved, we will assign a rating from 0 percent to as much as 100 percent. VA uses a schedule for evaluating disabilities that is published as title 38, Code of Federal Regulations, Part 4. In rare cases, we can assign a disability level other than the levels found in the schedule for a specific condition if your impairment is not adequately covered by the schedule.

We consider evidence of the following in determining disability rating:

- Nature and symptoms of the condition;
- Severity and duration of the symptoms; **AND**
- Impact of the condition and symptoms on employment.

Examples of evidence that you should tell us about or give to us that may affect how we assign a disability evaluation include the following:

- Information about on-going treatment records, including VA or other Federal treatment records, you have not previously told us about;
- Social Security determinations;
- Statements from employers as to job performance, lost time, or other information regarding how your condition(s) affect your ability to work; **OR**
- Statements discussing your disability symptoms from people who have witnessed how the symptoms affect you.

For more information on the FDC Program, visit our web site at <http://benefits.va.gov/transformation/fastclaims/>.

For more information on VA benefits, visit our web site at [www.va.gov](http://www.va.gov), contact us at <https://iris.custhelp.com>, or call us toll-free at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the Federal relay number is 711. VA forms are available at [www.va.gov/vaforms](http://www.va.gov/vaforms).

**IMPORTANT:** If you wish to make a claim for **veterans non service-connected pension benefits** because you have little or no income, use VA Form 21P-527EZ, *Application for Pension*. VA forms are available at [www.va.gov/vaforms](http://www.va.gov/vaforms). If you cannot access this form, write the word "**Pension**" in Item 16, or at the top of the attached application and VA will send you the form.

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### SECTION III: HOMELESS INFORMATION

**IMPORTANT:** The following questions (Items 15A through 15F) should **only** be completed if you are currently homeless or at risk of becoming homeless. If this item does not apply to you, skip to Section IV.

<p>15A. ARE YOU CURRENTLY HOMELESS?</p> <p><input type="checkbox"/> YES <i>(If "Yes," complete Item 15B regarding your living situation)</i></p> <p><input type="checkbox"/> NO</p>	<p>15B. CHECK THE BOX THAT APPLIES TO YOUR LIVING SITUATION:</p> <p><input type="checkbox"/> LIVING IN A HOMELESS SHELTER</p> <p><input type="checkbox"/> NOT CURRENTLY IN A SHELTERED ENVIRONMENT (e.g., living in a car or tent)</p> <p><input type="checkbox"/> STAYING WITH ANOTHER PERSON</p> <p><input type="checkbox"/> FLEEING CURRENT RESIDENCE</p> <p><input type="checkbox"/> OTHER (Specify): _____</p>
<p>15C. ARE YOU CURRENTLY AT RISK OF BECOMING HOMELESS?</p> <p><input type="checkbox"/> YES <i>(If "Yes," complete Item 15D regarding your living situation)</i></p> <p><input type="checkbox"/> NO</p>	<p>15D. CHECK THE BOX THAT APPLIES TO YOUR LIVING SITUATION:</p> <p><input type="checkbox"/> HOUSING WILL BE LOST IN 30 DAYS</p> <p><input type="checkbox"/> LEAVING PUBLICLY FUNDED SYSTEM OF CARE (e.g., homeless shelter)</p> <p><input type="checkbox"/> OTHER (Specify): _____</p>
<p>15E. POINT OF CONTACT <i>(Name of person VA can contact in order to get in touch with you)</i></p>	<p>15F. POINT OF CONTACT TELEPHONE NUMBER <i>(Include Area Code)</i></p>

<b>SECTION IV: CLAIM INFORMATION</b>
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16. LIST THE CURRENT DISABILITY(IES) OR SYMPTOMS THAT YOU CLAIM ARE RELATED TO YOUR MILITARY SERVICE AND/OR SERVICE-CONNECTED DISABILITY. (If applicable, identify whether a disability is due to a service-connected disability; confinement as a prisoner of war; exposure to Agent Orange, asbestos, mustard gas, ionizing radiation, or Gulf War chemical agents; or a disability of high compensation payable by 38 U.S.C. 1151.)

**NOTE:** List your claimed conditions below. See the following three examples for guidance on how to complete Section IV.

EXAMPLES OF DISABILITY(IES)		EXAMPLES OF EXPOSURE TYPE	EXAMPLES OF HOW THE DISABILITY(IES) RELATE TO SERVICE	EXAMPLES OF DATES
Example 1. HEARING LOSS		NOISE	HEAVY EQUIPMENT OPERATOR IN SERVICE	JULY 1968
Example 2. DIABETES		AGENT ORANGE	SERVICE IN VIETNAM WAR	DECEMBER 1972
Example 3. LEFT KNEE, SECONDARY TO RIGHT KNEE			INJURED LEFT KNEE WHEN BRACE ON RIGHT KNEE FAILED	6/11/2008
CURRENT DISABILITY(IES)		IF DUE TO EXPOSURE, EVENT, OR INJURY, PLEASE SPECIFY (e.g., Agent Orange, radiation)	EXPLAIN HOW THE DISABILITY(IES) RELATES TO THE IN-SERVICE EVENT/EXPOSURE/INJURY	APPROXIMATE DATE DISABILITY(IES) BEGAN OR WORSENERD
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				



VETERANS SOCIAL SECURITY NO.        -      -         

17. LIST VA MEDICAL CENTER(S) (VAMC) AND DEPARTMENT OF DEFENSE (DOD) MILITARY TREATMENT FACILITIES (MTF) WHERE YOU RECEIVED TREATMENT AFTER DISCHARGE FOR YOUR CLAIMED DISABILITY(IES) LISTED IN ITEM 16 AND PROVIDE TREATMENT DATES:		
A. ENTER THE DISABILITY TREATED AND NAME/LOCATION OF THE TREATMENT FACILITY	B. DATE(S) OF TREATMENT	

**NOTE:** IF YOU WISH TO CLAIM ANY OF THE FOLLOWING, COMPLETE AND ATTACH THE REQUIRED FORM(S) AS STATED BELOW  
(VA forms are available at [www.va.gov/vaforms](http://www.va.gov/vaforms)).

For:	Required Form(s):
Dependents	VA Form 21-686c and, if claiming a child aged 18-23 years and in school, VA Form 21-674
Individual Unemployability	VA Form 21-8940 and 21-4192
Post-Traumatic Stress Disorder	VA Form 21-0781 and 21-0781a
Specially Adapted Housing or Special Home Adaptation	VA Form 26-4555
Auto Allowance	VA Form 21-4502
Veteran/Spouse Aid and Attendance benefits	VA Form 21-2680 or, if based on nursing home attendance, VA Form 21-0779

### SECTION V: SERVICE INFORMATION

18A. DID YOU SERVE UNDER ANOTHER NAME? <input type="checkbox"/> YES (If "Yes," complete Item 18B) <input type="checkbox"/> NO (If "No," skip to Item 19A)		18B. LIST THE OTHER NAME(S) YOU SERVED UNDER:							
19A. BRANCH OF SERVICE (Check all that apply)  <input type="checkbox"/> ARMY <input type="checkbox"/> NAVY <input type="checkbox"/> MARINE CORPS  <input type="checkbox"/> AIR FORCE <input type="checkbox"/> COAST GUARD		19B. COMPONENT (Check all that apply)  <input type="checkbox"/> ACTIVE <input type="checkbox"/> RESERVES <input type="checkbox"/> NATIONAL GUARD							
20A. MOST RECENT ACTIVE SERVICE DATES (MM,DD,YYYY)  ENTRY DATE: <span style="display: inline-block; width: 40px; text-align: center;">Month</span> <span style="display: inline-block; width: 40px; text-align: center;">Day</span> <span style="display: inline-block; width: 100px; text-align: center;">Year</span> <div style="display: flex; justify-content: space-between;"> <div style="width: 20%;">             ENTRY DATE: <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> - <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> - <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> </div> <div style="width: 20%;">             EXIT DATE: <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> - <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> - <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> </div> </div>		20B. PLACE OF LAST OR ANTICIPATED SEPARATION							
20C. DID YOU SERVE IN A COMBAT ZONE SINCE 9-11-2001?  <input type="checkbox"/> YES <input type="checkbox"/> NO		20D. ADDITIONAL PERIODS OF SERVICE (Indicate enlistment and discharge dates, if applicable) <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%; text-align: center;">Enlistment Date(s)</th> <th style="width: 50%; text-align: center;">Discharge Date(s)</th> </tr> <tr><td style="height: 30px;"></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td></tr> </table>		Enlistment Date(s)	Discharge Date(s)				
Enlistment Date(s)	Discharge Date(s)								
21A. ARE YOU CURRENTLY SERVING OR HAVE YOU EVER SERVED IN THE RESERVES OR NATIONAL GUARD?  <input type="checkbox"/> YES (If "Yes," complete Items 21B thru 21F) <input type="checkbox"/> NO (If "No," skip to Item 22A)		21B. COMPONENT  <input type="checkbox"/> NATIONAL GUARD  <input type="checkbox"/> RESERVES							
21C. OBLIGATION TERM OF SERVICE  From: <span style="display: inline-block; width: 40px; text-align: center;">Month</span> <span style="display: inline-block; width: 40px; text-align: center;">Day</span> <span style="display: inline-block; width: 100px; text-align: center;">Year</span> <div style="display: flex; justify-content: space-between;"> <div style="width: 20%;">             From: <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> - <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> - <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> </div> <div style="width: 20%;">             To: <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> - <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> - <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> </div> </div>		21D. CURRENT OR LAST ASSIGNED NAME AND ADDRESS OF UNIT:							
21E. CURRENT OR ASSIGNED PHONE NUMBER OF UNIT (Include Area Code)  (       )		21F. ARE YOU CURRENTLY RECEIVING INACTIVE DUTY TRAINING PAY?  <input type="checkbox"/> YES <input type="checkbox"/> NO							
22A. ARE YOU CURRENTLY ACTIVATED ON FEDERAL ORDERS WITHIN THE NATIONAL GUARD OR RESERVES?  <input type="checkbox"/> YES (If "Yes," complete Items 22B & 22C) <input type="checkbox"/> NO		22B. DATE OF ACTIVATION: (MM,DD,YYYY)  <div style="display: flex; justify-content: space-between;"> <div style="width: 20%;">             Month <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> </div> <div style="width: 20%;">             Day <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> </div> <div style="width: 20%;">             Year <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> </div> </div>							
22C. ANTICIPATED SEPARATION DATE: (MM,DD,YYYY)  <div style="display: flex; justify-content: space-between;"> <div style="width: 20%;">             Month <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> </div> <div style="width: 20%;">             Day <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> </div> <div style="width: 20%;">             Year <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> </div> </div>		23A. HAVE YOU EVER BEEN A PRISONER OF WAR?  <input type="checkbox"/> YES (If "Yes," complete Item 23B) <input type="checkbox"/> NO							
23B. DATES OF CONFINEMENT (MM,DD,YYYY)  <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%; text-align: center;">From:</th> <th style="width: 50%; text-align: center;">To:</th> </tr> <tr> <td style="padding: 5px;"> <div style="display: flex; justify-content: space-between;"> <div style="width: 20%;">             Month <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> </div> <div style="width: 20%;">             Day <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> </div> <div style="width: 20%;">             Year <span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span><span style="border: 1px solid black; padding: 2px 5px;">  </span> </div> </div> </td> <td style="padding: 5px;"> <div style="display: flex; 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## SECTION VI: SERVICE PAY (Retired Pay, Separation Pay, and Disability Severance Pay)

24A. ARE YOU RECEIVING MILITARY RETIRED PAY?  <input type="checkbox"/> YES (If "Yes," complete Items 24C and 24D)  <input type="checkbox"/> NO		24B. WILL YOU RECEIVE MILITARY RETIRED PAY IN THE FUTURE?  <input type="checkbox"/> YES (If "Yes," explain below (e.g. future Reserve/National Guard retirement, pending MEB/PEB and also complete Items 24C and 24D)  <input type="checkbox"/> NO
24C. BRANCH OF SERVICE	24D. MONTHLY AMOUNT  \$	25. RETIRED STATUS  <input type="checkbox"/> RETIRED <input type="checkbox"/> PERMANENT DISABILITY RETIRED LIST  <input type="checkbox"/> TEMPORARY DISABILITY RETIRED LIST

**IMPORTANT INFORMATION ON MILITARY RETIRED PAY (Includes all Uniformed Services Retired Pay):**

Submission of this application constitutes a waiver of military retired pay in an amount equal to VA compensation awarded, if you are entitled to both benefits. Your retired pay may be reduced by the amount of VA compensation awarded. Receipt of the full amount of military retired pay and VA compensation at the same time **may** result in an overpayment, which **may** be subject to collection. If you qualify for concurrent receipt of VA compensation and military retired pay, the waiver of retired pay will not apply. If you do not want to waive any retired pay to receive VA compensation, you should check the box in **Item 26**.

**IMPORTANT: VA COMPENSATION PAY IS NON-TAXABLE. THEREFORE, VA COMPENSATION PAY MAY BE THE GREATER BENEFIT.**

☐ 26. Do NOT pay me VA compensation. I do NOT want to receive VA compensation in lieu of retired pay.

**IMPORTANT INFORMATION ON SEPARATION/SEVERANCE PAY:**

VA compensation, if granted, may be withheld to recoup any disability severance or separation pay such as involuntary separation pay, voluntary separation pay, or special separation benefit, you receive from your branch of service. In addition, if you receive a Voluntary Separation Incentive (VSI), your VSI payments may be reduced if you are awarded VA compensation. Receipt of VA compensation and VSI at the same time may result in an overpayment of VSI, which *may* be subject to collection.

27A. HAVE YOU EVER RECEIVED SEPARATION PAY, DISABILITY SEVERANCE PAY, OR ANY OTHER LUMP SUM PAYMENT FROM YOUR BRANCH OF SERVICE? <input type="checkbox"/> YES <i>(If "Yes," complete Items 27B through 27D)</i> <input type="checkbox"/> NO		
27B. DATE PAYMENT RECEIVED (MM,DD,YYYY)  <div style="display: flex; justify-content: space-around; font-size: small;"> <span>Month</span> <span>Day</span> <span>Year</span> </div> <div style="display: flex; align-items: center; margin-top: 10px;"> <div style="border: 1px solid black; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="border: 1px solid black; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="margin: 0 5px;">-</div> <div style="border: 1px solid black; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="border: 1px solid black; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="margin: 0 5px;">-</div> <div style="border: 1px solid black; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="border: 1px solid black; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="border: 1px solid black; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> <div style="border: 1px solid black; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div> </div>	27C. BRANCH OF SERVICE	27D. AMOUNT RECEIVED (Provide pre-tax amount)  <div style="text-align: right; font-size: 2em; margin-top: 10px;">\$</div>

### IMPORTANT INFORMATION ON INACTIVE DUTY TRAINING PAY:

You may elect to keep the active or inactive duty training pay you received from the military service department. However, to be legally entitled to keep your training pay, you must waive VA benefits for the number of days equal to the number of days for which you received training pay. In most instances, it will be to your advantage to waive your VA benefits and keep your training pay.

If you waive VA benefits to receive training pay by checking the box in **Item 28**, VA will retroactively adjust your VA award to withhold benefits equal to the total number of training days waived and at the monthly rate in effect for the fiscal year period for which you received training pay. This action may result in an overpayment of compensation, which *may* be subject to collection.

**IMPORTANT: VA COMPENSATION PAY IS NON-TAXABLE. THEREFORE VA COMPENSATION PAY MAY BE THE GREATER BENEFIT.**

☐ 28. Do NOT pay me VA compensation. I do NOT want to receive VA compensation in lieu of training pay.

**SECTION VII: DIRECT DEPOSIT INFORMATION**

The Department of Treasury requires all Federal benefit payments be made by electronic funds transfer (EFT), also called direct deposit. Please attach a voided personal check or deposit slip or provide the information requested below in **Items 30, 31 and 32** to enroll in direct deposit. If you do not have a bank account, you must receive your payment through Direct Express Debit MasterCard. To request a Direct Express Debit MasterCard you must apply at [www.usdirectexpress.com](http://www.usdirectexpress.com) or by telephone at 1-800-333-1795. If you elect not to enroll, you must contact representatives handling waiver requests for the Department of Treasury at 1-888-224-2950. They will encourage your participation in EFT and address any questions or concerns you may have.

<input type="checkbox"/> 29. I CERTIFY THAT I DO NOT HAVE AN ACCOUNT WITH A FINANCIAL INSTITUTION OR CERTIFIED PAYMENT AGENT <i>(If you check this box skip to Section VIII)</i>	
30. ACCOUNT NUMBER <i>(Check only <b>one</b> box below and provide the account number)</i>	
Account No.: _____	<input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS
31. NAME OF FINANCIAL INSTITUTION <i>(Provide the name of the bank where you want your direct deposit)</i>	32. ROUTING OR TRANSIT NUMBER <i>(The first nine numbers located at the bottom left of your check)</i>

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**SECTION VIII: CLAIM CERTIFICATION AND SIGNATURE****VETERAN/SERVICEMEMBER CERTIFICATION AND SIGNATURE**

I certify and authorize the release of information. I certify that the statements in this document are true and complete to the best of my knowledge. I authorize any person or entity, including but not limited to any organization, service provider, employer, or government agency, to give the Department of Veterans Affairs any information about me, and I waive any privilege which makes the information confidential.

I certify I have received the notice attached to this application titled, *Notice to Veteran/Service Member of Evidence Necessary to Substantiate a Claim for Veterans Disability Compensation and Related Compensation Benefits*.

I certify I have enclosed all the information or evidence that will support my claim, to include an identification of relevant records available at a Federal facility such as a VA medical center; **OR**, I have no information or evidence to give VA to support my claim; **OR**, I have checked the box in Item 1, on page 8, indicating I want my claim processed under the standard claim process because I plan to submit additional evidence in support of my claim.

33A. VETERAN/SERVICE MEMBER SIGNATURE (REQUIRED) (Sign in ink)

33B. DATE SIGNED

**SECTION IX: WITNESSES TO SIGNATURE**

34A. SIGNATURE OF WITNESS (Sign in ink. If veteran signed above using an "X")

34B. PRINTED NAME AND ADDRESS OF WITNESS

35A. SIGNATURE OF WITNESS (Sign in ink. If veteran signed above using an "X")

35B. PRINTED NAME AND ADDRESS OF WITNESS

**SECTION X: ALTERNATE SIGNER CERTIFICATION AND SIGNATURE**

I certify that by signing on behalf of the claimant, that I am a court-appointed representative; **OR**, an attorney in fact or agent authorized to act on behalf of a claimant under a durable power of attorney; **OR**, a person who is responsible for the care of the claimant, to include but not limited to a spouse or other relative; **OR**, a manager or principal officer acting on behalf of an institution which is responsible for the care of an individual; **AND**, that the claimant is under the age of 18; **OR**, is mentally incompetent to provide substantially accurate information needed to complete the form, or to certify that the statements made on the form are true and complete; **OR**, is physically unable to sign this form.

I understand that I may be asked to confirm the truthfulness of the answers to the best of my knowledge under penalty of perjury. I also understand that VA may request further documentation or evidence to verify or confirm my authorization to sign or complete an application on behalf of the claimant if necessary. Examples of evidence which VA may request include: Social Security Number (SSN) or Taxpayer Identification Number (TIN); a certificate or order from a court with competent jurisdiction showing your authority to act for the claimant with a judge's signature and a date/time stamp; copy of documentation showing appointment of fiduciary; durable power of attorney showing the name and signature of the claimant and your authority as attorney in fact or agent; health care power of attorney, affidavit or notarized statement from an institution or person responsible for the care of the claimant indicating the capacity or responsibility of care provided; or any other documentation showing such authorization.

36A. ALTERNATE SIGNER SIGNATURE (REQUIRED) (Sign in ink)

36B. DATE SIGNED

**SECTION XI: POWER OF ATTORNEY (POA) SIGNATURE**

I certify that the claimant has authorized the undersigned representative to file this supplemental claim on behalf of the claimant and that the claimant is aware and accepts the information provided in this document. I certify that the claimant has authorized the undersigned representative to state that the claimant certifies the truth and completion of the information contained in this document to the best of claimant's knowledge.

**NOTE:** A POA's signature **will not** be accepted unless at the time of submission of this claim a valid VA Form 21-22, *Appointment of Veterans Service Organization as Claimant's Representative*, or VA Form 21-22a, *Appointment of Individual As Claimant's Representative*, indicating the appropriate POA is of record with VA.

37A. POA/AUTHORIZED REPRESENTATIVE SIGNATURE (Sign in ink)

37B. DATE SIGNED (MM,DD,YYYY)

**PRIVACY ACT NOTICE:** The form will be used to determine allowance to compensation benefits (38 U.S.C. 5101). The responses you submit are considered confidential (38 U.S.C. 5701). VA may disclose the information that you provide, including Social Security numbers, outside VA if the disclosure is authorized under the Privacy Act, including the routine uses identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records - VA, published in the Federal Register. The requested information is considered relevant and necessary to determine maximum benefits under the law. Information submitted is subject to verification through computer matching programs with other agencies. VA may make a "routine use" disclosure for: civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of VA benefits, verification of identity and status, and personnel administration. Your obligation to respond is required in order to obtain or retain benefits. Information that you furnish may be utilized in computer matching programs with other Federal or State agencies for the purpose of determining your eligibility to receive VA benefits, as well as to collect any amount owed to the United States by virtue of your participation in any benefit program administered by the Department of Veterans Affairs. Social Security information: You are required to provide the Social Security number requested under 38 U.S.C. 5101(c)(1). VA may disclose Social Security numbers as authorized under the Privacy Act, and, specifically may disclose them for purposes stated above.

**RESPONDENT BURDEN:** We need this information to determine your eligibility for compensation. Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 25 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

**PENALTY:** The law provides severe penalties which include fine or imprisonment, or both, for the willful submission of any statement or evidence of a material fact, knowing it to be false, or for the fraudulent acceptance of any payment to which you are not entitled.

**VA DATE STAMP  
(DO NOT WRITE IN THIS SPACE)**

**INSTRUCTIONS:** Read the Privacy Act and Respondent Burden on Page 2 before completing the form. Complete as much of Section I as possible. The information requested will help process your claim for benefits. If you need any additional room, use the second page.

**NOTE:** You will *either* complete the form online or by hand. Please print the information request in ink, neatly, and legibly to help process the form.

[illegible]

4. VETERAN'S DATE OF BIRTH (MM/DD/YYYY)

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Month                      Day                      Year

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7. E-MAIL ADDRESS (Optional)

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8. MAILING ADDRESS (Number and street or rural route, P.O. Box, City, State, ZIP Code and Country)

[illegible]

Apt./Unit Number

City

State/Province

Country

ZIP Code/Postal Code

**(The following statement is made in connection with a claim for benefits in the case of the above-named veteran/beneficiary.)**

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**(The following statement is made in connection with a claim for benefits in the case of the above-named veteran/beneficiary.)**

### SECTION III: DECLARATION OF INTENT

**I CERTIFY THAT** the statements on this form are true and correct to the best of my knowledge and belief.

9. SIGNATURE (*Sign in ink*)

10. DATE SIGNED (MM/DD/YYYY)

**PENALTY:** The law provides severe penalties which include fine or imprisonment, or both, for the willful submission of any statement or evidence of a material fact, knowing it to be false.

**PRIVACY ACT INFORMATION:** The VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA Programs and delivery of VA benefits, verification of identity and status, and personnel administration) as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records - VA, published in the Federal Register. Your obligation to respond is required to obtain or retain benefits. VA uses your SSN to identify your claim file. Providing your SSN will help ensure that your records are properly associated with your claim file. Giving us your SSN account information is voluntary. Refusal to provide your SSN by itself will not result in the denial of benefits. The VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by Federal Statute of law in effect prior to January 1, 1975, and still in effect. The requested information is considered relevant and necessary to determine maximum benefits under the law. The responses you submit are considered confidential (38 U.S.C. 5701). Information submitted is subject to verification through computer matching programs with other agencies.

**RESPONDENT BURDEN:** We need this information to obtain evidence in support of your claim for benefits (38 U.S.C. 501(a) and (b)). Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 15 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

**AUTHORIZATION TO DISCLOSE INFORMATION TO THE DEPARTMENT OF VETERANS AFFAIRS (VA)**

**SECTION I - RECORDS TO BE RELEASED TO THE DEPARTMENT OF VETERANS AFFAIRS (VA)**

**SECTION II - VETERAN IDENTIFICATION INFORMATION**

PAGE 1

VETERAN'S SOCIAL SECURITY NO.

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## SECTION V - AUTHORIZATION AND CONSENT TO RELEASE INFORMATION TO VA AND SIGNATURE

12. IF MY CONSENT TO THIS INFORMATION IS LIMITED, THE LIMITATION IS WRITTEN HERE (*If this space is left blank, there is no limitation to records*):

**TO WHOM:** The Department of Veterans Affairs (VA).

**PURPOSE:** Determining my eligibility for benefits, and whether I can manage such benefits.

**EXPIRES:** This authorization is good for 12 months from the date shown in Item 12.

- I authorize the use of a copy (including electronic copy) of this form for the disclosure of the information described above in Section I.
- I understand that there are some circumstances in which this information may be re-disclosed to other parties (See page 2 for details).
- I may write to VA and my source(s) to revoke this authorization at any time (See page 2 for details).
- VA will give me a copy of this form, if I ask; I may also ask the source(s) to allow me to inspect or get a copy of material to be disclosed.
- **I have read both pages of this form and agree to the disclosures above from the types of sources listed. See Patient Acknowledgement below.**

13. SIGNATURE OF PERSON AUTHORIZING DISCLOSURE (*Required*) (*Sign in ink*)

14. DATE SIGNED (*MM/DD/YYYY*) (*Required*)

15. PRINTED NAME OF PERSON SIGNING (*First, Middle Initial, Last*)

16. RELATIONSHIP TO VETERAN/CLAIMANT (*If other than self, please provide full name, title, organization, city, State, and ZIP code. All court appointments must include docket number, county, and State*)

**NOTE:** This general and special authorization to disclose was developed to comply with the provisions regarding disclosure of medical and other information under P.L. 104-191 ("HIPAA"); 45 C.F.R. parts 160 and 164; 42 U.S.C. §290dd-2; 42 C.F.R. part 2, and State Law.

**PRIVACY ACT NOTICE:** The VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of VA benefits, verification of identity and status, and personnel administration) as identified in the VA system of records, 58VA21/22/28 Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records - VA, published in the Federal Register. Your obligation to respond is voluntary. However, if the information including your Social Security Number (SSN) is not furnished completely or accurately, the source to which this authorization is addressed may not be able to identify and locate your records, and provide a copy to VA. VA uses your SSN to identify your claim file. Providing your SSN will help ensure that your records are properly associated with your claim file. Giving us your SSN account information is voluntary. Refusal to provide your SSN by itself will not result in the denial of benefits. The VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by Federal Statute of law in effect prior to January 1, 1975 and still in effect.

If you do not revoke this authorization, it will automatically expire in 12 months from the date you sign and date the form. Signing this form is voluntary, but failing to sign it, or revoking it before we receive necessary information could prevent an accurate or timely decision on your claim, and could result in denial or loss of benefits. Although the information we obtain with this form is almost never used for any purpose other than those stated above, the information may be disclosed by VA without your consent if authorized by Federal laws such as the Privacy Act.

Under the Government Paperwork Elimination Act (GPEA) (Public Law 105-277), the Office of Management and Budget (OMB) ensures that agencies, when practicable, provide for the option of electronic maintenance, submission of disclosure of information and for the use and acceptance of electronic signatures. GPEA states that electronic records submitted or maintained in accordance with the procedures developed by OMB, or electronic signature or other forms of electronic authentication used in accordance with such procedures, "shall not be denied legal effect, validity, or enforceability merely because such records are in electronic form" (Public Law 105-277, section 1707).

**RESPONDENT BURDEN:** We need this information and your written authorization to obtain your treatment records to help us get the information required to process your claim. Title 38, United States Code, allows us to ask for this information. You can provide this authorization by signing VA Form 21-4142. Federal law permits sources with information about you to release that information if you sign a single authorization to release all your information from all possible sources. We will make copies of it for each source. A few States, and some individual sources of information, require that the authorization specifically name the source that you authorize to release personal information. In those cases, we may ask you to sign one authorization for each source and we may contact you again if we need you to sign more authorizations. We estimate that you will need an average of 5 minutes to review the instructions, find the information and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. Valid OMB control numbers can be located on the OMB Internet Page at [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). If desired, you may call 1-800-827-1000 to get information on where to send comments or suggestions about this form. If you use the Telecommunications Device for the Deaf (TDD), the Federal relay number is 711.

**PATIENT ACKNOWLEDGMENT:** I HEREBY AUTHORIZE the sources listed in Section IV, to release any information that may have been obtained in connection with a physical, psychological or psychiatric examination or treatment, with the understanding that VA will use this information in determining my eligibility to veterans benefits I have claimed. I understand that the source being asked to provide the Veterans Benefits Administration with records under this authorization may not require me to execute this authorization before it provides me with treatment, payment for health care, enrollment in a health plan, or eligibility for benefits provided by it. I understand that once my source sends this information to VA under this authorization, the information will no longer be protected by the HIPAA Privacy Rule, but will be protected by the Federal Privacy Act, 5 USC 552a, and VA may disclose this information as authorized by law. I also understand that I may revoke this authorization in writing, at any time except to the extent a source of information has already relied on it to take an action. To revoke, I must send a written statement to the VA Regional Office handling my claim or the Board of Veterans' Appeals (if my claim is related to an appeal) and also send a copy directly to any of my sources that I no longer wish to disclose information about me. I understand that VA may use information disclosed prior to revocation to decide my claim.

**NOTE:** For additional information regarding VA Form 21-4142, refer to the following website: <https://www.benefits.va.gov/privateproviders/>.

VA DATE STAMP  
DO NOT WRITE IN THIS SPACE

**NOTE - PLEASE READ THE PRIVACY ACT AND RESPONDENT BURDEN INFORMATION BELOW BEFORE COMPLETING THIS FORM.**

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From:	To:
From:	To:

[illegible]

Apt./Unit Number					
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[illegible]State/Province 

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Country		
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ZIP Code/Postal Code

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From:	To:
From:	To:

[illegible]

Apt./Unit Number					
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[illegible]State/Province 

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Country 

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ZIP Code/Postal Code

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VETERAN'S SOCIAL SECURITY NO.    -   -

11A. PROVIDER OR FACILITY NAME		11B. DATE(S) OF TREATMENT: <i>(Include the time period (month/day/year) for the treatment by the provider listed in Item 11A)</i>	
		From:	To:
		From:	To:
11C. PROVIDER/FACILITY STREET ADDRESS <i>(Number and street, P.O. or rural route)</i>			
No. & Street <input style="width: 100%;" type="text"/>			
Apt./Unit Number <input style="width: 100%;" type="text"/>		City <input style="width: 100%;" type="text"/>	
State/Province <input style="width: 100%;" type="text"/>		Country <input style="width: 100%;" type="text"/> ZIP Code/Postal Code <input style="width: 100%;" type="text"/> - <input style="width: 100%;" type="text"/>	
12A. PROVIDER OR FACILITY NAME		12B. DATE(S) OF TREATMENT: <i>(Include the time period (month/day/year) for the treatment by the provider listed in Item 11A)</i>	
		From:	To:
		From:	To:
12C. PROVIDER/FACILITY STREET ADDRESS <i>(Number and street, P.O. or rural route)</i>			
No. & Street <input style="width: 100%;" type="text"/>			
Apt./Unit Number <input style="width: 100%;" type="text"/>		City <input style="width: 100%;" type="text"/>	
State/Province <input style="width: 100%;" type="text"/>		Country <input style="width: 100%;" type="text"/> ZIP Code/Postal Code <input style="width: 100%;" type="text"/> - <input style="width: 100%;" type="text"/>	
13A. PROVIDER OR FACILITY NAME		13B. DATE(S) OF TREATMENT: <i>(Include the time period (month/day/year) for the treatment by the provider listed in Item 11A)</i>	
		From:	To:
		From:	To:
13C. PROVIDER/FACILITY STREET ADDRESS <i>(Number and street, P.O. or rural route)</i>			
No. & Street <input style="width: 100%;" type="text"/>			
Apt./Unit Number <input style="width: 100%;" type="text"/>		City <input style="width: 100%;" type="text"/>	
State/Province <input style="width: 100%;" type="text"/>		Country <input style="width: 100%;" type="text"/> ZIP Code/Postal Code <input style="width: 100%;" type="text"/> - <input style="width: 100%;" type="text"/>	

**PRIVACY ACT NOTICE:** The VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of VA benefits, verification of identity and status, and personnel administration) as identified in the VA system of records, 58VA21/22/28 Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records - VA, and published in the Federal Register. Your obligation to respond is voluntary. However, if the information including your Social Security Number (SSN) is not furnished completely or accurately, the health care provider to which this authorization is addressed may not be able to identify and locate your records, and provide a copy to VA. VA uses your SSN to identify your claim file. Providing your SSN will help ensure that your records are properly associated with your claim file. Giving us your SSN account information is voluntary. Refusal to provide your SSN by itself will not result in the denial of benefits. The VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by Federal Statute of law in effect prior to January 1, 1975 and still in effect.

**RESPONDENT BURDEN:** We need this information to obtain your treatment records. Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 5 minutes to review the instructions, find the information and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. Valid OMB control numbers can be located on the OMB Internet Page at [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). If desired, you may call 1-800-827-1000 to get information on where to send comments or suggestions about this form.



**VA DATE STAMP**  
**DO NOT WRITE IN THIS SPACE**

**IMPORTANT:** If you or someone you know is in crisis, call the Veterans Crisis Line at 1-800-273-8255 and press 1, or visit <https://www.veteranscrisisline.net/> to chat online, or send a text message to 838255 to receive confidential support 24 hours a day, 7 days a week, 365 days a year. Support for **deaf and hard of hearing** individuals is available.

**INSTRUCTIONS:** List the stressful incident or incidents that occurred in service that you feel contributed to your current condition. For each incident, provide a description of what happened, the date, the geographic location, your unit assignment and dates of assignment, and the full names and unit assignments of you know of who were killed or injured during the incident. Please provide dates within at least a 60-day range and do not use nicknames. It is important that you complete the form in detail and be as specific as possible so that research of military records can be thoroughly conducted. If more space is needed, attach a separate sheet, indicating the item number to which the answers apply.

**NOTE:** You can *either* complete the form online or by hand. Please print the information requested in ink, neatly and legibly to help process the form.

[illegible]

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Month                      Day                      Year

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7B. SECONDARY TELEPHONE NUMBER (Include Area Code)

## Month                      Day                      Year

**FROM:**      Month              Day              Year

TO:	Month	Day	Year
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[illegible][illegible]

8F. MEDALS OR CITATIONS YOU RECEIVED BECAUSE OF THE INCIDENT

VETERAN'S SOCIAL SECURITY NO.      -      -         

**SECTION II: STRESSFUL INCIDENTS (Continued)**

**NOTE:** Information about persons who were killed or injured during the first incident (*attach a separate sheet if more space is needed.*)

9A. NAME OF PERSON (*First, Middle Initial, Last*)

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9B. RANK (*If applicable*)

9C. DATE OF INJURY/DEATH (MM/DD/YYYY)

Month Day Year

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9D. PLEASE CHECK ONE

- ☐ KILLED IN ACTION    ☐ WOUNDED IN ACTION    ☐ OTHER  
☐ KILLED NON-BATTLE    ☐ INJURED NON-BATTLE

9E. UNIT ASSIGNMENT DURING INCIDENT (*Such as, DIVISION, WING, BATTALION, CAVALRY, SHIP*)


10A. NAME OF PERSON (*First, Middle Initial, Last*)

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10B. RANK (*If applicable*)

10C. DATE OF INJURY/DEATH (MM/DD/YYYY)

Month Day Year

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10D. PLEASE CHECK ONE

- ☐ KILLED IN ACTION    ☐ WOUNDED IN ACTION    ☐ OTHER  
☐ KILLED NON-BATTLE    ☐ INJURED NON-BATTLE

10E. UNIT ASSIGNMENT DURING INCIDENT (*Such as, DIVISION, WING, BATTALION, CAVALRY, SHIP*)


11A. DATE **SECOND** INCIDENT OCCURRED (MM/DD/YYYY)

Month Day Year

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11B. DATES OF UNIT ASSIGNMENT (MM/DD/YYYY)

FROM: Month Day Year

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TO: Month Day Year

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11C. LOCATION OF INCIDENT (*City, State, Country, Province, landmark or military installation*)


11D. UNIT ASSIGNMENT DURING INCIDENT (*Such as, DIVISION, WING, BATTALION, CAVALRY, SHIP*)


11E. DESCRIPTION OF THE INCIDENT

11F. MEDALS OR CITATIONS YOU RECEIVED BECAUSE OF THE INCIDENT

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**SECTION II: STRESSFUL INCIDENTS (Continued)**

**NOTE:** Information about persons who were killed or injured during the second incident (*attach a separate sheet if more space is needed.*)

12A. NAME OF PERSON (First, Middle Initial, Last) \_\_\_\_\_

[illegible]

12B. RANK (If applicable)	12C. DATE OF INJURY/DEATH (MM/DD/YYYY)	12D. PLEASE CHECK ONE
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12B. RANK (If applicable)	12C. DATE OF INJURY/DEATH (MM/DD/YYYY)	12D. PLEASE CHECK ONE
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Month	Day	Year	<input type="checkbox"/> KILLED IN ACTION	<input type="checkbox"/> WOUNDED IN ACTION	<input type="checkbox"/> OTHER
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$$\boxed{\phantom{0}}\boxed{\phantom{0}} - \boxed{\phantom{0}}\boxed{\phantom{0}} - \boxed{\phantom{0}}\boxed{\phantom{0}}\boxed{\phantom{0}}\boxed{\phantom{0}}$$

12B. RANK (If applicable)	12C. DATE OF INJURY/DEATH (MM/DD/YYYY)	12D. PLEASE CHECK ONE
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Month	Day	Year	<input type="checkbox"/> KILLED IN ACTION	<input type="checkbox"/> WOUNDED IN ACTION	<input type="checkbox"/> OTHER
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☐ KILLED BATTLE ☐ KILLED NON-BATTLE ☐ INJURED BATTLE ☐ INJURED NON-BATTLE

12E. UNIT ASSIGNMENT DURING INCIDENT (Such as, DIVISION, WING, BATTALION, CAVALRY, SHIP)

[illegible][illegible][illegible]

13A. NAME OF PERSON (First, Middle Initial, Last)

[illegible]

13B. RANK (If applicable)	13C. DATE OF INJURY/DEATH (MM/DD/YYYY)	13D. PLEASE CHECK ONE
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13B. RANK (If applicable)	13C. DATE OF INJURY/DEATH (MM/DD/YYYY)	13D. PLEASE CHECK ONE
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Month	Day	Year	<input type="checkbox"/> KILLED IN ACTION	<input type="checkbox"/> WOUNDED IN ACTION	<input type="checkbox"/> OTHER
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$$\boxed{\phantom{0}}\boxed{\phantom{0}} - \boxed{\phantom{0}}\boxed{\phantom{0}} - \boxed{\phantom{0}}\boxed{\phantom{0}}\boxed{\phantom{0}}\boxed{\phantom{0}}$$

13B. RANK (If applicable)	13C. DATE OF INJURY/DEATH (MM/DD/YYYY)	13D. PLEASE CHECK ONE
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Month	Day	Year	<input type="checkbox"/> KILLED IN ACTION	<input type="checkbox"/> WOUNDED IN ACTION	<input type="checkbox"/> OTHER
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<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px 5px; margin-right: 5px;"> <div style="border: 1px solid black; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="border: 1px solid black; width: 10px; height: 10px;"></div> <div style="border: 1px solid black; width: 10px; height: 10px;"></div> </div> </div> <div style="margin: 0 5px;">-</div> <div style="border: 1px solid black; padding: 2px 5px; margin-right: 5px;"> <div style="border: 1px solid black; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="border: 1px solid black; width: 10px; height: 10px;"></div> <div style="border: 1px solid black; width: 10px; height: 10px;"></div> </div> </div> <div style="margin: 0 5px;">-</div> <div style="border: 1px solid black; padding: 2px 5px;"> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="border: 1px solid black; width: 10px; height: 10px;"></div> <div style="border: 1px solid black; width: 10px; height: 10px;"></div> <div style="border: 1px solid black; width: 10px; height: 10px;"></div> <div style="border: 1px solid black; width: 10px; height: 10px;"></div> </div> </div> </div>		<div style="display: flex; justify-content: space-between;"> <div><input type="checkbox"/> KILLED BATTLE</div> <div><input type="checkbox"/> INJURED BATTLE</div> <div><input type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div><input type="checkbox"/> KILLED NON-BATTLE</div> <div><input type="checkbox"/> INJURED NON-BATTLE</div> </div>
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13E. UNIT ASSIGNMENT DURING INCIDENT (Such as, DIVISION, WING, BATTALION, CAVALRY, SHIP)

[illegible][illegible][illegible]

14. REMARKS
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**SECTION III: VETERAN SIGNATURE**

**I HEREBY CERTIFY THAT** the information I have given on this form is true and correct to the best of my knowledge and belief.

15. SIGNATURE	16. DATE SIGNED (MM/DD/YYYY)
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15. SIGNATURE	16. DATE SIGNED (MM/DD/YYYY)
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**PENALTY** - The law provides severe penalties which include fine or imprisonment or both, for the willful submission of any statement or evidence of a material fact, knowing it is false, or fraudulent acceptance of any payment to which you are not entitled.

**PRIVACY ACT NOTICE:** The VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of VA benefits, verification of identity and status, and personnel administration) as identified in VA system of records, 58VA21/22/28, Compensation, Pension, Education and Vocational Rehabilitation and Employment Records - VA, published in the Federal Register. Your obligation to respond is voluntary. However, the requested information is necessary to obtain supporting evidence of stressful incidents in service. If the information is not furnished completely or accurately, VA will not be able to thoroughly research your military records for supporting evidence. The responses you submit are considered confidential (38 U.S.C. 5701).

**RESPONDENT BURDEN:** We need this information in order to assist you in supporting your claim for post-traumatic stress disorder (38 U.S.C. 5107 (a)). Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 1 hour 10 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain). If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

**VA DATE STAMP**  
**DO NOT WRITE IN THIS SPACE**

## PAGE 1

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## SECTION II: STRESSFUL INCIDENT(S) (Continued)

12. Please provide in the space below any other information that you feel is important for us to know that may help your claim. The following are some examples, of behavioral changes that you may have experienced following the incident(s):

- visits to a medical or counseling clinic or dispensary without a specific diagnosis or specific ailment
- sudden requests for a change in occupational series or duty assignment
- increased use of leave without an apparent reason
- changes in performance and performance evaluations
- episodes of depression, panic attacks, or anxiety without an identifiable cause
- increased or decreased use of prescription medications
- increased use of over-the-counter medications
- substance abuse such as alcohol or drugs
- increased disregard for military or civilian authority
- obsessive behavior such as overeating or undereating
- pregnancy tests around the time of the incident
- tests for HIV or sexually transmitted diseases
- unexplained economic or social behavior changes
- breakup of a primary relationship

**SECTION III: VETERAN SIGNATURE**

**I HEREBY CERTIFY THAT** the foregoing statement(s) are true and correct to the best of my knowledge and belief.

13. SIGNATURE

14. DATE SIGNED (MM/DD/YYYY)

**PENALTY** - The law provides severe penalties which include fine or imprisonment or both, for the willful submission of any statement or evidence of a material fact, knowing it is false, or fraudulent acceptance of any payment to which you are not entitled.

**PRIVACY ACT NOTICE:** The VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of VA benefits, verification of identity and status, and personnel administration) as identified in VA system of records, 58VA21/22/28, Compensation, Pension, Education and Vocational Rehabilitation and Employment Records - VA, published in the Federal Register. Your obligation to respond is voluntary. However, the requested information is necessary to obtain supporting evidence of stressful incidents in service. If the information is not furnished completely or accurately, VA will not be able to thoroughly research your military records and other sources for supporting evidence. The responses you submit are considered confidential (38 U.S.C. 5701).

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## INSTRUCTIONS FOR COMPLETING ENROLLMENT APPLICATION FOR HEALTH BENEFITS

### Please Read Before You Start . . . What is VA Form 10-10EZ used for?

For Veterans to apply for enrollment in the VA health care system. The information provided on this form will be used by VA to determine your eligibility for medical benefits and on average will take 30 minutes to complete. This includes the time it will take to read instructions, gather the necessary facts and fill out the form.

### Where can I get help filling out the form and if I have questions?

You may use ANY of the following to request assistance:

- Ask VA to help you fill out the form by calling us at 1-877-222-VETS (8387).
- Access VA's website at <http://www.va.gov> and select "Contact the VA."
- Contact the Enrollment Coordinator at your local VA health care facility.
- Contact a National or State Veterans Service Organization.

### Definitions of terms used on this form:

**SERVICE-CONNECTED (SC):** A VA determination that an illness or injury was incurred or aggravated in the line of duty, in the active military, naval or air service.

**COMPENSABLE:** A VA determination that a service-connected disability is severe enough to warrant monetary compensation.

**NONCOMPENSABLE:** A VA determination that a service-connected disability is not severe enough to warrant monetary compensation.

**NONSERVICE-CONNECTED (NSC):** A Veteran who does not have a VA determined service-related condition.

### Getting Started: ALL VETERANS MUST COMPLETE SECTIONS I - III.

#### Directions for Sections I - III:

**Section I - General Information:** Answer all questions.

**Section II - Military Service Information:** If you are not currently receiving benefits from VA, you may attach a copy of your discharge or separation papers from the military (such as DD-214 or, for WWII Veterans, a "WD" Form), with your signed application to expedite processing of your application. If you are currently receiving benefits from VA, we will cross-reference your information with VA data.

**Section III - Insurance Information:** Include information for all health insurance companies that cover you, this includes coverage provided through a spouse or significant other. Bring your insurance cards, Medicare and/or Medicaid card with you to each health care appointment.

#### Directions for Sections IV-VI:

**Financial Disclosure: ONLY NSC AND 0% NONCOMPENSABLE SC VETERANS MUST COMPLETE THIS SECTION TO DETERMINE ELIGIBILITY AND COPAY RESPONSIBILITY FOR VA HEALTH CARE ENROLLMENT AND/OR CARE OR SERVICES.**

#### Financial Disclosure Requirements Do Not Apply To:

- a former Prisoner of War; or
- those in receipt of a Purple Heart; or
- a recently discharged Combat Veteran; or
- those discharged for a disability incurred or aggravated in the line of duty; or
- those receiving VA SC disability compensation; or
- those receiving VA pension; or
- those in receipt of Medicaid benefits; or
- those who served in Vietnam between January 9, 1962 and May 7, 1975; or
- those who served in SW Asia during the Gulf War between August 2, 1990 and November 11, 1998; or
- those who served at least 30 days at Camp Lejeune between August 1, 1953 and December 31, 1987.

You are not required to disclose your financial information; however, VA is not currently enrolling new applicants who decline to provide their financial information unless they have other qualifying eligibility factors. If a financial assessment is not used to determine your priority for enrollment you may choose not to disclose your information. However, if a financial assessment is used to determine your eligibility for cost-free medication, travel assistance or waiver of the travel deductible, and you do not disclose your financial information, you will not be eligible for these benefits.

**Continued ...**

**Section IV - Dependent Information:** Include the following:

- Your spouse even if you did not live together, as long as you contributed support last calendar year.
- Your biological children, adopted children, and stepchildren who are unmarried and under the age of 18, or at least 18 but under 23 and attending high school, college or vocational school (full or part-time), or became permanently unable to support themselves before age 18.
- Child support contributions. Contributions can include tuition or clothing payments or payments of medical bills.

**Section V - Previous Calendar Year Gross Annual Income of Veteran, Spouse and Dependent Children.**

**Report:**

- Gross annual income from employment, except for income from your farm, ranch, property or business. Include your wages, bonuses, tips, severance pay and other accrued benefits and your child's income information if it could have been used to pay your household expenses.
- Net income from your farm, ranch, property, or business.
- Other income amounts, including retirement and pension income, Social Security Retirement and Social Security Disability income, compensation benefits such as VA disability, unemployment, Workers and black lung, cash gifts, interest and dividends, including tax exempt earnings and distributions from Individual Retirement Accounts (IRAs) or annuities.

**Do Not Report:**

Donations from public or private relief, welfare or charitable organizations; Supplemental Security Income (SSI) and need-based payments from a government agency; profit from the occasional sale of property; income tax refunds, reinvested interest on Individual Retirement Accounts (IRAs); scholarships and grants for school attendance; disaster relief payments; reimbursement for casualty loss; loans; Radiation Compensation Exposure Act payments; Agent Orange settlement payments; Alaska Native Claims Settlement Acts Income, payments to foster parent; amounts in joint accounts in banks and similar institutions acquired by reason of death of the other joint owner; Japanese ancestry restitution under Public Law 100-383; cash surrender value of life insurance; lump-sum proceeds of life insurance policy on a Veteran; and payments received under the Medicare transitional assistance program.

**Section VI - Previous Calendar Year Deductible Expenses.**

Report non-reimbursed medical expenses paid by you or your spouse. Include expenses for medical and dental care, drugs, eyeglasses, Medicare, medical insurance premiums and other health care expenses paid by you for dependents and persons for whom you have a legal or moral obligation to support. Do not list expenses if you expect to receive reimbursement from insurance or other sources. Report last illness and burial expenses, e.g., prepaid burial, paid by the Veteran for spouse or dependent(s).

**Section VII - Submitting your application.**

1. You or an individual to whom you have delegated your Power of Attorney must sign and date the form. If you sign with an "X", 2 people you know must witness you as you sign. They must sign the form and print their names. If the form is not signed and dated appropriately, VA will return it for you to complete.
2. Attach any continuation sheets, a copy of supporting materials and your Power of Attorney documents to your application.

**Where do I send my application?**

Mail the original application and supporting materials to the Health Eligibility Center, 2957 Clairmont Road, Suite 200  
Atlanta, GA 30329.

**PAPERWORK REDUCTION ACT AND PRIVACY ACT INFORMATION**

**The Paperwork Reduction Act** of 1995 requires us to notify you that this information collection is in accordance with the clearance requirements of Section 3507 of the Paperwork Reduction Act of 1995. We may not conduct or sponsor, and you are not required to respond to, a collection of information unless it displays a valid OMB number. We anticipate that the time expended by all individuals who must complete this form will average 30 minutes. This includes the time it will take to read instructions, gather the necessary facts and fill out the form.

**Privacy Act Information:** VA is asking you to provide the information on this form under 38 U.S.C. Sections 1705, 1710, 1712, and 1722 in order for VA to determine your eligibility for medical benefits. Information you supply may be verified from initial submission forward through a computer-matching program. VA may disclose the information that you put on the form as permitted by law. VA may make a "routine use" disclosure of the information as outlined in the Privacy Act systems of records notices and in accordance with the VHA Notice of Privacy Practices. Providing the requested information is voluntary, but if any or all of the requested information is not provided, it may delay or result in denial of your request for health care benefits. Failure to furnish the information will not have any effect on any other benefits to which you may be entitled. If you provide VA your Social Security Number, VA will use it to administer your VA benefits. VA may also use this information to identify Veterans and persons claiming or receiving VA benefits and their records, and for other purposes authorized or required by law.





Department of Veterans Affairs

# APPLICATION FOR HEALTH BENEFITS

## SECTION I - GENERAL INFORMATION

Federal law provides criminal penalties, including a fine and/or imprisonment for up to 5 years, for concealing a material fact or making a materially false statement. (See 18 U.S.C. 1001)

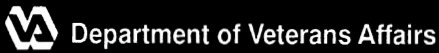
1A. VETERAN'S NAME (Last, First, Middle Name)			1B. PREFERRED NAME		2. MOTHER'S MAIDEN NAME	
3A. BIRTH SEX  <input type="checkbox"/> MALE  <input type="checkbox"/> FEMALE	3B. SELF-IDENTIFIED GENDER IDENTITY  <input type="checkbox"/> MALE  <input type="checkbox"/> FEMALE	4. ARE YOU SPANISH, HISPANIC, OR LATINO?  <input type="checkbox"/> YES  <input type="checkbox"/> NO	5. WHAT IS YOUR RACE? (You may check more than one. Information is required for statistical purposes only.)  <input type="checkbox"/> ASIAN <input type="checkbox"/> AMERICAN INDIAN OR ALASKA NATIVE <input type="checkbox"/> BLACK OR AFRICAN AMERICAN <input type="checkbox"/> WHITE <input type="checkbox"/> NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER			6. SOCIAL SECURITY NO.
7. VA CLAIM NUMBER		8A. DATE OF BIRTH (mm/dd/yyyy)	8B. PLACE OF BIRTH (City and State)			9. RELIGION
10A. PERMANENT ADDRESS (Street)		10B. CITY	10C. STATE	10D. ZIP CODE	10E. COUNTY	
10F. HOME TELEPHONE NO. (Include area code)		10G. MOBILE TELEPHONE NO. (Include area code)		10H. E-MAIL ADDRESS		
11A. RESIDENTIAL ADDRESS (Street)		11B. CITY	11C. STATE	11D. ZIP CODE	11E. COUNTY	
12. TYPE OF BENEFIT(S) APPLYING FOR (You may check more than one)  <input type="checkbox"/> ENROLLMENT/HEALTH SERVICES <input type="checkbox"/> DENTAL		13. CURRENT MARTIAL STATUS  <input type="checkbox"/> MARRIED <input type="checkbox"/> NEVER MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED				
14A. NEXT OF KIN NAME		14B. NEXT OF KIN ADDRESS			14C. NEXT OF KIN RELATIONSHIP	
14D. NEXT OF KIN TELEPHONE NO. (Include Area Code)		14E. NEXT OF KIN WORK TELEPHONE NO. (Include Area Code)		15. DESIGNEE - INDIVIDUAL TO RECEIVE POSSESSION OF YOUR PERSONAL PROPERTY LEFT ON PREMISES UNDER VA CONTROL AFTER YOUR DEPARTURE OR AT THE TIME OF DEATH (Note: This does not constitute a will or transfer of title)		
16. I AM ENROLLING TO OBTAIN MINIMUM ESSENTIAL COVERAGE UNDER THE AFFORDABLE CARE ACT  <input type="checkbox"/> YES <input type="checkbox"/> NO		17. WHICH VA MEDICAL CENTER OR OUTPATIENT CLINIC DO YOU PREFER? (for listing of facilities visit <a href="http://www.va.gov/directory">www.va.gov/directory</a> )			18. WOULD YOU LIKE FOR VA TO CONTACT YOU TO SCHEDULE YOUR FIRST APPOINTMENT?  <input type="checkbox"/> YES <input type="checkbox"/> NO	

## SECTION II - MILITARY SERVICE INFORMATION

1A. LAST BRANCH OF SERVICE		1B. LAST ENTRY DATE		1C. FUTURE DISCHARGE DATE		1D. LAST DISCHARGE DATE	
1E. DISCHARGE TYPE						1F. MILITARY SERVICE NUMBER	
2. MILITARY HISTORY (Check yes or no)				YES	NO	YES	NO
A. ARE YOU A PURPLE HEART AWARD RECIPIENT?				<input type="checkbox"/>	<input type="checkbox"/>	G. DO YOU HAVE A VA SERVICE-CONNECTED RATING?	
B. ARE YOU A FORMER PRISONER OF WAR?				<input type="checkbox"/>	<input type="checkbox"/>	IF "YES", WHAT IS YOUR RATED PERCENTAGE _____ %	
C. DID YOU SERVE IN A COMBAT THEATER OF OPERATIONS AFTER 11/11/1998?				<input type="checkbox"/>	<input type="checkbox"/>	H. DID YOU SERVE IN VIETNAM BETWEEN JANUARY 9, 1962 AND MAY 7, 1975?	
D. WERE YOU DISCHARGED OR RETIRED FROM MILITARY FOR A DISABILITY INCURRED IN THE LINE OF DUTY?				<input type="checkbox"/>	<input type="checkbox"/>	I. WERE YOU EXPOSED TO RADIATION WHILE IN THE MILITARY?	
E. ARE YOU RECEIVING DISABILITY RETIREMENT PAY INSTEAD OF VA COMPENSATION?				<input type="checkbox"/>	<input type="checkbox"/>	J. DID YOU RECEIVE NOSE AND THROAT RADIUM TREATMENTS WHILE IN THE MILITARY?	
F. DID YOU SERVE IN SW ASIA DURING THE GULF WAR BETWEEN AUGUST 2, 1990 AND NOVEMBER 11, 1998?				<input type="checkbox"/>	<input type="checkbox"/>	K. DID YOU SERVE ON ACTIVE DUTY AT LEAST 30 DAYS AT CAMP LEJEUNE FROM AUGUST 1, 1953 THROUGH DECEMBER 31, 1987?	

<b>APPLICATION FOR HEALTH BENEFITS</b> <i>Continued</i>		VETERAN'S NAME <i>(Last, First, Middle)</i>		SOCIAL SECURITY NUMBER	
<b>SECTION III - INSURANCE INFORMATION</b> <i>(Use a separate sheet for additional information)</i>					
1. ENTER YOUR HEALTH INSURANCE COMPANY NAME, ADDRESS AND TELEPHONE NUMBER <i>(include coverage through spouse or other person)</i>					
2. NAME OF POLICY HOLDER	3. POLICY NUMBER	4. GROUP CODE	5. ARE YOU ELIGIBLE FOR MEDICAID?  <input type="checkbox"/> YES <input type="checkbox"/> NO	6A. ARE YOU ENROLLED IN MEDICARE HOSPITAL INSURANCE PART A?  <input type="checkbox"/> YES <input type="checkbox"/> NO  6B. EFFECTIVE DATE <i>(mm/dd/yyyy)</i>	
<b>SECTION IV - DEPENDENT INFORMATION</b> <i>(Use a separate sheet for additional dependents)</i>					
1. SPOUSE'S NAME <i>(Last, First, Middle Name)</i>			2. CHILD'S NAME <i>(Last, First, Middle Name)</i>		
1A. SPOUSE'S SOCIAL SECURITY NUMBER			2A. CHILD'S DATE OF BIRTH <i>(mm/dd/yyyy)</i>	2B. CHILD'S SOCIAL SECURITY NO.	
1B. SPOUSE'S DATE OF BIRTH <i>(mm/dd/yyyy)</i>	1C. SPOUSE SELF-IDENTIFIED GENDER IDENTITY <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		2C. DATE CHILD BECAME YOUR DEPENDENT <i>(mm/dd/yyyy)</i>		
1D. DATE OF MARRIAGE <i>(mm/dd/yyyy)</i>			2D. CHILD'S RELATIONSHIP TO YOU <i>(Check one)</i> <input type="checkbox"/> SON <input type="checkbox"/> DAUGHTER <input type="checkbox"/> STEPSON <input type="checkbox"/> STEPDAUGHTER		
1E. SPOUSE'S ADDRESS AND TELEPHONE NUMBER <i>(Street, City, State, ZIP if different from Veteran's)</i>			2E. WAS CHILD PERMANENTLY AND TOTALLY DISABLED BEFORE THE AGE OF 18? <input type="checkbox"/> YES <input type="checkbox"/> NO		
			2F. IF CHILD IS BETWEEN 18 AND 23 YEARS OF AGE, DID CHILD ATTEND SCHOOL LAST CALENDAR YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO		
3. IF YOUR SPOUSE OR DEPENDENT CHILD DID NOT LIVE WITH YOU LAST YEAR, DID YOU PROVIDE SUPPORT? <input type="checkbox"/> YES <input type="checkbox"/> NO			2G. EXPENSES PAID BY YOUR DEPENDENT CHILD FOR COLLEGE, VOCATIONAL REHABILITATION OR TRAINING <i>(e.g., tuition, books, materials)</i>		
<b>SECTION V - EMPLOYMENT INFORMATION</b>					
1A. VETERAN'S EMPLOYMENT STATUS <i>(Check one)</i> . <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> NOT EMPLOYED <input type="checkbox"/> RETIRED				1B. DATE OF RETIREMENT	
1C. COMPANY NAME. <i>(Complete if employed or retired)</i>		1D. COMPANY ADDRESS <i>(Complete if employed or retired -Street, City, State, ZIP)</i>		1E. COMPANY PHONE NUMBER <i>(Complete if employed or retired) (Include area code)</i>	
<b>SECTION VI - PREVIOUS CALENDAR YEAR GROSS ANNUAL INCOME OF VETERAN, SPOUSE AND DEPENDENT CHILDREN</b> <i>(Use a separate sheet for additional dependents)</i>					
1. GROSS ANNUAL INCOME FROM EMPLOYMENT <i>(wages, bonuses, tips, etc.)</i> EXCLUDING INCOME FROM YOUR FARM, RANCH, PROPERTY OR BUSINESS	VETERAN	SPOUSE	CHILD 1		
2. NET INCOME FROM YOUR FARM, RANCH, PROPERTY OR BUSINESS	\$ _____	\$ _____	\$ _____		
3. LIST OTHER INCOME AMOUNTS <i>(e.g., Social Security, compensation, pension interest, dividends)</i> EXCLUDING WELFARE.	\$ _____	\$ _____	\$ _____		
<b>SECTION VII - PREVIOUS CALENDAR YEAR DEDUCTIBLE EXPENSES</b>					
1. TOTAL NON-REIMBURSED MEDICAL EXPENSES PAID BY YOU OR YOUR SPOUSE <i>(e.g., payments for doctors, dentists, medications, Medicare, health insurance, hospital and nursing home)</i> VA will calculate a deductible and the net medical expenses you may claim.	\$ _____				
2. AMOUNT YOU PAID LAST CALENDAR YEAR FOR FUNERAL AND BURIAL EXPENSES (INCLUDING PREPAID BURIAL EXPENSES) FOR YOUR DECEASED SPOUSE OR DEPENDENT CHILD <i>(Also enter spouse or child's information in Section VI.)</i>	\$ _____				
3. AMOUNT YOU PAID LAST CALENDAR YEAR FOR YOUR COLLEGE OR VOCATIONAL EDUCATIONAL EXPENSES <i>(e.g., tuition, books, fees, materials)</i> DO NOT LIST YOUR DEPENDENTS' EDUCATIONAL EXPENSES.	\$ _____				

<b>APPLICATION FOR HEALTH BENEFITS</b> <i>Continued</i>	VETERAN'S NAME ( <i>Last, First, Middle</i> )	SOCIAL SECURITY NUMBER
<b>SECTION VII - CONSENT TO COPAYS AND TO RECEIVE COMMUNICATIONS</b>		
By submitting this application you are agreeing to pay the applicable VA copays for treatment or services of your NSC conditions as required by law. You also agree to receive communications from VA to your supplied email or mobile number.		
<b>ASSIGNMENT OF BENEFITS</b>		
<p>I understand that pursuant to 38 U.S.C. Section 1729 and 42 U.S.C. 2651, the Department of Veterans Affairs (VA) is authorized to recover or collect from my health plan (HP) or any other legally responsible third party for the reasonable charges of nonservice-connected VA medical care or services furnished or provided to me. I hereby authorize payment directly to VA from any HP under which I am covered (including coverage provided under my spouse's HP) that is responsible for payment of the charges for my medical care, including benefits otherwise payable to me or my spouse. Furthermore, I hereby assign to the VA any claim I may have against any person or entity who is or may be legally responsible for the payment of the cost of medical services provided to me by the VA. I understand that this assignment shall not limit or prejudice my right to recover for my own benefit any amount in excess of the cost of medical services provided to me by the VA or any other amount to which I may be entitled. I hereby appoint the Attorney General of the United States and the Secretary of Veterans' Affairs and their designees as my Attorneys-in-fact to take all necessary and appropriate actions in order to recover and receive all or part of the amount herein assigned. I hereby authorize the VA to disclose, to my attorney and to any third party or administrative agency who may be responsible for payment of the cost of medical services provided to me, information from my medical records as necessary to verify my claim. Further, I hereby authorize any such third party or administrative agency to disclose to the VA any information regarding my claim.</p>		
<b>ALL APPLICANTS MUST SIGN AND DATE THIS FORM. REFER TO INSTRUCTIONS WHICH DEFINE WHO CAN SIGN ON BEHALF OF THE VETERAN.</b>		
<b>SIGNATURE OF APPLICANT</b> <i>(Sign in ink)</i>	<b>DATE</b>	



## REQUEST FOR AND CONSENT TO RELEASE OF INFORMATION FROM INDIVIDUAL'S RECORDS

**PRIVACY ACT STATEMENT:** The execution of this form does not authorize the release of information other than that specifically described below. The information requested on this form is solicited under Title 38, United States Code, and will authorize release of the information you specify. The information may also be disclosed outside VA as permitted by law to include disclosure as stated in the "Notices of Systems of VA Records" published in the Federal Register in accordance with the Privacy Act of 1974.

**RESPONDENT BURDEN:** VA may not conduct or sponsor, and the respondent is not required to respond, to this collection of information unless it displays a valid OMB Control Number. The Privacy Act of 1974 (5 U.S.C. 552a) and VA's confidentiality statute (38 U.S.C. 5701) as implemented by 38 CFR 1.526(a) and 38 CFR 1.576(b) require individuals to provide written consent before documents or information can be disclosed to third parties not allowed to receive records or information under any other provision of law. The information requested is approved under OMB Control Number 2900-0028 and is necessary to ensure that the statutory requirements of the Privacy Act and VA's confidentiality statute are met.

Responding to this collection of information is voluntary. However, if the information is not furnished, we may not be able to comply with your request. Public reporting burden for this collection is estimated to average 7.5 minutes per respondent, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspects of this collection of Information, including suggestions for reducing this burden, to the VA Clearance Officer (005E3), 810 Vermont Avenue, NW, Washington, DC 20420. **Send comments only. Do not send** this form or requests for benefits to this address.

TO	Department of Veterans Affairs	NAME OF INDIVIDUAL (Type or print)	
		VA FILE NO. (Include prefix)	SOCIAL SECURITY NUMBER

NAME AND ADDRESS OF ORGANIZATION OR INDIVIDUAL TO WHOM INFORMATION IS TO BE RELEASED

### VETERAN'S REQUEST

I hereby request and authorize the Department of Veterans Affairs to release the following information from the records identified above to the organization, agency, or individual named hereon:	NAME
---	------

INFORMATION REQUESTED (Number each item requested and give the dates or approximate dates - period from and to - covered by each.)

PURPOSE(S) FOR WHICH THE INFORMATION IS TO BE USED.

**NOTE:** Additional information may be listed on the reverse side of this form.

SIGNATURE OF INDIVIDUAL OR PERSON AUTHORIZED TO SIGN FOR INDIVIDUAL (Attach authority to sign, e.g., POA)	DATE
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## INSTRUCTION AND INFORMATION SHEET FOR SF 180, REQUEST PERTAINING TO MILITARY RECORDS

**1. General Information.** The Standard Form 180, Request Pertaining to Military Records (SF180) is used to request information from military records. Certain identifying information is necessary to determine the location of an individual's record of military service. Please try to answer each item on the SF 180. If you do not have and cannot obtain the information for an item, show "NA," meaning the information is "not available". Include as much of the requested information as you can. Incomplete information may delay response time. To determine where to mail this request see Page 2 of the SF180 for record locations and facility addresses.

Online requests may be submitted to the National Personnel Records Center (NPRC) by a veteran or deceased veteran's next-of-kin using eVetRecs at <http://www.archives.gov/veterans/military-service-records/>.

**2. Personnel Records/Military Human Resource Records/Official Military Personnel File (OMPF) and Medical Records/Service Treatment Records (STR).** Personnel records of military members who were discharged, retired, or died in service **LESS THAN 62 YEARS AGO** and medical records are in the legal custody of the military service department and are administered in accordance with rules issued by the Department of Defense and the Department of Homeland Security (DHS, Coast Guard). STRs of persons on active duty are generally kept at the local servicing clinic. After the last day of active duty, STRs should be requested from the appropriate address on page 2 of the SF 180. (See item 3, Archival Records, if the military member was discharged, retired or died in service more than 62 years ago.)

a. Release of information: Release of information is subject to restrictions imposed by the military services consistent with Department of Defense regulations, the provisions of the Freedom of Information Act (FOIA) and the Privacy Act of 1974. The service member (either past or present) or the member's legal guardian has access to almost any information contained in that member's own record. The authorization signature of the service member or the member's legal guardian is needed in Section III of the SF180. Others requesting information from military personnel records and/or STRs must have the release authorization in Section III of the SF 180 signed by the member or legal guardian. If the appropriate signature cannot be obtained, only limited types of information can be provided. If the former member is deceased, the surviving next-of-kin may, under certain circumstances, be entitled to greater access to a deceased veteran's records than a member of the general public. The next-of-kin may be any of the following: unmarried surviving spouse, father, mother, son, daughter, sister, or brother. Requesters **MUST provide proof of death, such as a copy of a death certificate, newspaper article (obituary) or death notice, coroner's report of death, funeral director's signed statement of death, or verdict of coroner's jury.**

b. Fees for records: There is no charge for most services provided to service members or next-of-kin of deceased veterans. A nominal fee is charged for certain types of service. In most instances, service fees cannot be determined in advance. If your request involves a service fee, you will receive an invoice with your records.

**3. Archival Records.** Personnel records of military members who were discharged, retired, or died in service **62 OR MORE YEARS AGO** have been transferred to the legal custody of NARA and are referred to as "archival records".

a. Release of Information: Archival records are open to the public. The Privacy Act of 1974 does not apply to archival records, therefore, written authorization from the veteran or next-of-kin is not required. In order to protect the privacy of the veteran, his/her family, and third parties named in the records, the personal privacy exemption of the Freedom of Information Act (5 U.S.C. 552 (b) (6)) may still apply and may preclude the release of some information.

b. Fees for Archival Records: Access to archival records are granted by offering copies of the records for a fee (44 U.S.C. 2116 (c)). If a fee applies to the photocopies of documents in the requested record, you will receive an invoice. Photocopies will be sent after payment is made. For more information see <http://www.archives.gov/st-louis/archival-programs/military-personnel-archival/ompf-archival-requests.html>.

**4. Where reply may be sent.** The reply may be sent to the service member or any other address designated by the service member or other authorized requester. If the designated address is NOT registered to the addressee by the U.S. Postal Service (USPS), provide BOTH the addressee's name AND "in care of" (c/o) the name of the person to whom the address is registered on the NAME line in Section III, item 3, on page 1 of the SF 180. The COMPLETE address must be provided, INCLUDING any apartment/suite/unit/lot/space/etc. number.

**5. Definitions and abbreviations.** DISCHARGED -- the individual has no current military status; SERVICE TREATMENT RECORD (STR) -- The chronology of medical, mental health, and dental care received by service members during the course of their military career (does not include records of treatment while hospitalized); TDRL -- Temporary Disability Retired List.

**6. Service completed before World War I.** National Archives Trust Fund (NATF) forms must be used to request these records. Obtain the forms by e-mail from [inquire@nara.gov](mailto:inquire@nara.gov) or write to the Code 6 address on page 2 of the SF 180.

### PRIVACY ACT OF 1974 COMPLIANCE INFORMATION

The following information is provided in accordance with 5 U.S.C. 552a(e)(3) and applies to this form. Authority for collection of the information is 44 U.S.C. 2907, 3101, and 3103, and Public Law 104-134 (April 26, 1996), as amended in title 31, section 7701. Disclosure of the information is voluntary. If the requested information is not provided, it may delay servicing your inquiry because the facility servicing the service member's record may not have all of the information needed to locate it. The purpose of the information on this form is to assist the facility servicing the records (see the address list) in locating the correct military service record(s) or information to answer your inquiry. This form is then retained as a record of disclosure. The form may also be disclosed to Department of Defense components, the Department of Veterans Affairs, the Department of Homeland Security (DHS, U.S. Coast Guard), or the National Archives and Records Administration when the original custodian of the military health and personnel records transfers all or part of those records to that agency. If the service member was a member of the National Guard, the form may also be disclosed to the Adjutant General of the appropriate state, District of Columbia, or Puerto Rico, where he or she served.

### PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT

Public burden reporting for this collection of information is estimated to be five minutes per request, including time for reviewing instructions and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to National Archives and Records Administration (ISSD), 8601 Adelphi Road, College Park, MD 20740-6001. **DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. SEND COMPLETED FORMS TO THE APPROPRIATE ADDRESS LISTED ON PAGE 2 OF THE SF 180.**

## REQUEST PERTAINING TO MILITARY RECORDS

Requests from veterans or deceased veteran's next-of-kin may be submitted online by using eVetRecs at <http://www.archives.gov/veterans/military-service-records/>  
To ensure the best possible service, please thoroughly review the accompanying instructions before filling out this form. PLEASE PRINT LEGIBLY OR TYPE BELOW.

### SECTION I - INFORMATION NEEDED TO LOCATE RECORDS (Furnish as much information as possible.)

1. NAME USED DURING SERVICE (last, first, full middle)		2. SOCIAL SECURITY #		3. DATE OF BIRTH		4. PLACE OF BIRTH					
5. SERVICE, PAST AND PRESENT (For an effective records search, it is important that ALL service be shown below.)		DATE ENTERED		DATE RELEASED		OFFICER		ENLISTED		SERVICE NUMBER (If unknown, write "unknown")	
a. ACTIVE		-				<input type="checkbox"/>		<input type="checkbox"/>			
b. RESERVE		-				<input type="checkbox"/>		<input type="checkbox"/>			
c. STATE NATIONAL GUARD		-				<input type="checkbox"/>		<input type="checkbox"/>			

6. IS THIS PERSON DECEASED? ☐ NO ☐ YES - **MUST** provide Date of Death if veteran is deceased: \_\_\_\_\_
7. DID THIS PERSON **RETIRE** FROM MILITARY SERVICE? ☐ NO ☐ YES

### SECTION II - INFORMATION AND/OR DOCUMENTS REQUESTED

#### 1. CHECK THE ITEM(S) YOU ARE REQUESTING:

- ☐ **DD Form 214 or equivalent.** Year(s) in which form(s) issued to veteran: \_\_\_\_\_  
This form contains information normally needed to verify military service. A copy may be sent to the veteran, the deceased veteran's next-of-kin, or other persons or organizations, if authorized in Section III, below. **An UNDELETED DD214 is ordinarily required to determine eligibility for benefits.** If you request a DELETED copy, the following items will be blacked out: authority for separation, reason for separation, reenlistment eligibility code, separation (SPD/SPN) code, and, for separations after June 30, 1979, character of separation and dates of time lost.  
**An UNDELETED copy will be sent UNLESS YOU SPECIFY A DELETED COPY by checking this box:** ☐ I want a DELETED copy.
- ☐ **Medical Records** Includes Service Treatment Records, Health (outpatient) and Dental Records. **IF HOSPITALIZED (inpatient) the FACILITY NAME and DATE (month and year) for EACH admission MUST be provided:** \_\_\_\_\_
- ☐ **Other (Specify):** \_\_\_\_\_

2. **PURPOSE:** (Providing information about the purpose of the request is **strictly voluntary**; however, it may help to provide the best possible response and may result in a faster reply. Information provided will in no way be used to make a decision to deny the request.)

- ☐ Benefits (explain) ☐ Employment ☐ VA Loan Programs ☐ Medical ☐ Genealogy ☐ Correction ☐ Personal ☐ Other (explain)

Explain here: \_\_\_\_\_

### SECTION III - RETURN ADDRESS AND SIGNATURE

#### 1. REQUESTER NAME:

2. ☐ I am the MILITARY SERVICE MEMBER OR VETERAN identified in Section I, above.
- ☐ I am the DECEASED VETERAN'S NEXT-OF-KIN (**MUST submit Proof of Death. See item 2a on instruction sheet.**)

(Relationship to deceased veteran)

- ☐ I am the VETERAN'S LEGAL GUARDIAN (**MUST submit copy of Court Appointment**) or AUTHORIZED REPRESENTATIVE (**MUST submit copy of Authorization Letter or Power of Attorney**)
- ☐ OTHER

(Specify type of Other)

#### 3. SEND INFORMATION/DOCUMENTS TO:

(Please print or type. See item 4 on accompanying instructions.)

Name

Street

Apt.

City

State

Zip Code

4. **AUTHORIZATION SIGNATURE:** I declare (or certify, verify, or state) under penalty of perjury under the laws of the United States of America that the information in this Section III is true and correct and that I authorize the release of the requested information. (See items 2a or 3a on accompanying instruction sheet. Without the Authorization Signature of the veteran, next-of-kin of deceased veteran, veteran's legal guardian, authorized government agent, or other authorized representative, only limited information can be released unless the request is archival. No signature is required if the request is for archival records.)

\* This form is available at <http://www.archives.gov/veterans/military-service-records/standard-form-180.html> on the National Archives and Records Administration (NARA) web site. \*

Signature Required - Do not print

Date

Daytime phone

Fax Number

Email address

The various categories of military service records are described in the chart below. For each category there is a code number which indicates the address at the bottom of the page to which this request should be sent. Please refer to the Instruction and Information Sheet accompanying this form as needed.

BRANCH	CURRENT STATUS OF SERVICE MEMBER	Personnel Record	Medical or Service Treatment Record
AIR FORCE	Discharged, deceased, or retired before 5/1/1994	14	14
	Discharged, deceased, or retired 5/1/1994 – 9/30/2004	14	11
	Discharged, deceased, or retired 10/1/2004 – 12/31/2013	1	11
	Discharged, deceased, or retired on or after 1/1/2014	1	13
	Active (including National Guard on active duty in the Air Force), TDRL, or general officers retired with pay	1	
	Reserve, IRR, Retired Reserve in non-pay status, current National Guard officers not on active duty in the Air Force, or National Guard released from active duty in the Air Force	2	
	Current National Guard enlisted not on active duty in the Air Force	2	13
COAST GUARD	Discharge, deceased, or retired before 1/1/1898	6	
	Discharged, deceased, or retired 1/1/1898 – 3/31/1998	14	14
	Discharged, deceased, or retired 4/1/1998 – 9/30/2006	14	11
	Discharged, deceased, or retired 10/1/2006 – 9/30/2013	3	11
	Discharged, deceased, or retired on or after 10/1/2013	3	14
	Active, Reserve, Individual Ready Reserve or TDRL	3	
MARINE CORPS	Discharged, deceased, or retired before 1/1/1895	6	
	Discharged, deceased, or retired 1/1/1905 – 4/30/1994	14	14
	Discharged, deceased, or retired 5/1/1994 – 12/31/1998	14	11
	Discharged, deceased, or retired 1/1/1999 – 12/31/2013	4	11
	Discharged, deceased, or retired on or after 1/1/2014	4	8
	Individual Ready Reserve	5	
	Active, Selected Marine Corps Reserve, TDRL	4	
ARMY	Discharged, deceased, or retired before 11/1/1912 (enlisted) or before 7/1/1917 (officer)	6	
	Discharged, deceased, or retired 11/1/1912 – 10/15/1992 (enlisted) or 7/1/1917 – 10/15/1992 (officer)	14	
	Discharged, deceased, or retired 10/16/1992 – 9/30/2002	14	11
	Discharged, deceased, or retired (including TDRL) 10/1/2002 – 12/31/2013	7	11
	Discharged, deceased, or retired (including TDRL) on or after 1/1/2014	7	9
	Current Soldier (Active, Reserve (including Individual Ready Reserve) or National Guard)	7	
NAVY	Discharged, deceased, or retired before 1/1/1886 (enlisted) or before 1/1/1903 (officer)	6	
	Discharged, deceased, or retired 1/1/1886 – 1/30/1994 (enlisted) or 1/1/1903 – 1/30/1994 (officer)	14	14
	Discharged, deceased, or retired 1/31/1994 – 12/31/1994	14	11
	Discharged, deceased, or retired 1/1/1995 – 12/31/2013	10	11
	Discharged, deceased, or retired on or after 1/1/2014	10	8
	Active, Reserve, or TDRL	10	
PHS	Public Health Service - Commissioned Corps officers only	12	

**ADDRESS LIST OF CUSTODIANS and SELF-SERVICE WEBSITES (BY CODE NUMBERS SHOWN ABOVE) – Where to write/send this form**

1	Air Force Personnel Center HQ AFPC/DPSIRP 550 C Street West, Suite 19 Randolph AFB, TX 78150-4721	6	National Archives & Records Administration Research Services (RDTIR) 700 Pennsylvania Avenue NW Washington, DC 20408-0001	11	Department of Veterans Affairs Records Management Center ATTN: Release of Information P.O. Box 5020 St. Louis, MO 63115-5020
2	Air Reserve Personnel Center Records Management Branch (DPTSC) 18420 E. Silver Creek Avenue Building 390 MS 68 Buckley AFB, CO 80011	7	US Army Human Resources Command's web page: <a href="https://www.hrc.army.mil/TAGD/Accessing%20or%20Requesting%20Your%20Official%20Military%20Personnel%20File%20Documents">https://www.hrc.army.mil/TAGD/Accessing%20or%20Requesting%20Your%20Official%20Military%20Personnel%20File%20Documents</a> or 1-888-ARMYHRC (1-888-276-9472)	12	Division of Commissioned Corps Officer Support ATTN: Records Officer 1101 Wootton Parkway, Plaza Level, Suite 100 Rockville, MD 20852
3	Commander, Personnel Service Center (BOPS-C-MR) MS7200 US Coast Guard 2703 Martin Luther King Jr Ave SE Washington, DC 20593-7200 <a href="mailto:MR_CustomerService@uscg.mil">MR_CustomerService@uscg.mil</a>	8	Navy Medicine Records Activity (NMRA) BUMED Detachment St. Louis 4300 Goodfellow Boulevard, Building 103 St. Louis, MO 63120	13	AF STR Processing Center ATTN: Release of Information 3370 Nacogdoches Road, Suite 116 San Antonio, TX 78217
4	Headquarters U.S. Marine Corps Manpower Management Records & Performance (MMRP-10) 2008 Elliot Road Quantico, VA 22134-5030	9	AMEDD Record Processing Center 3370 Nacogdoches Road, Suite 116 San Antonio, TX 78217	14	National Personnel Records Center (Military Personnel Records) 1 Archives Drive St. Louis, MO 63138-1002  eVetRecs: <a href="http://www.archives.gov/veterans/military-service-records/">http://www.archives.gov/veterans/military-service-records/</a>
5	Marine Forces Reserve 2000 Opelousas Avenue New Orleans, LA 70146-5400	10	Navy Personnel Command (PERS-313) 5720 Integrity Drive Millington, TN 38055-3120		



**APPLICATION FOR CORRECTION OF MILITARY RECORD  
UNDER THE PROVISIONS OF TITLE 10, U.S. CODE, SECTION 1552**  
(Please read Privacy Act Statement and instructions on back BEFORE completing this application.)

OMB No. 0704-0003  
OMB approval expires  
Dec 31, 2017

The public reporting burden for this collection of information, 0704-0003, is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

**RETURN COMPLETED FORM TO THE APPROPRIATE ADDRESS ON THE BACK OF THIS PAGE.**

**1. APPLICANT DATA** (The person whose record you are requesting to be corrected.)

a. BRANCH OF SERVICE (X one)	<input type="checkbox"/> ARMY	<input type="checkbox"/> NAVY	<input type="checkbox"/> AIR FORCE	<input type="checkbox"/> MARINE CORPS	<input type="checkbox"/> COAST GUARD
b. NAME (Print - Last, First, Middle Initial)	c. PRESENT OR LAST PAY GRADE		d. SERVICE NUMBER (If applicable)	e. SSN	

**2. PRESENT STATUS WITH RESPECT TO THE ARMED SERVICES** (Active Duty, Reserve, National Guard, Retired, Discharged, Deceased)

**3. TYPE OF DISCHARGE** (If by court-martial, state the type of court.)

**4. DATE OF DISCHARGE OR RELEASE FROM ACTIVE DUTY** (YYYYMMDD)

**5. I REQUEST THE FOLLOWING ERROR OR INJUSTICE IN THE RECORD BE CORRECTED AS FOLLOWS:** (Entry required)

**6. I BELIEVE THE RECORD TO BE IN ERROR OR UNJUST FOR THE FOLLOWING REASONS:** (Entry required)

a. IS THIS A REQUEST FOR RECONSIDERATION OF A PRIOR APPEAL?	<input type="checkbox"/> YES <input type="checkbox"/> NO	b. IF YES, WHAT WAS THE DOCKET NUMBER?	c. DATE OF THE DECISION
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**7. ORGANIZATION AND APPROXIMATE DATE (YYYYMMDD) AT THE TIME THE ALLEGED ERROR OR INJUSTICE IN THE RECORD OCCURRED** (Entry required)

**8. DISCOVERY OF ALLEGED ERROR OR INJUSTICE**

a. DATE OF DISCOVERY (YYYYMMDD)	b. IF MORE THAN THREE YEARS SINCE THE ALLEGED ERROR OR INJUSTICE WAS DISCOVERED, STATE WHY THE BOARD SHOULD FIND IT IN THE INTEREST OF JUSTICE TO CONSIDER THE APPLICATION.
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**9. IN SUPPORT OF THIS APPLICATION, I SUBMIT AS EVIDENCE THE FOLLOWING ATTACHED DOCUMENTS:** (If military documents or medical records are pertinent to your case, please send copies. If Veterans Affairs records are pertinent, give regional office location and claim number.)

**10. I DESIRE TO APPEAR BEFORE THE BOARD IN WASHINGTON, D.C.** (At no expense to the Government) (X one) ☐ YES. THE BOARD WILL DETERMINE IF WARRANTED. ☐ NO. CONSIDER MY APPLICATION BASED ON RECORDS AND EVIDENCE.

**11.a. COUNSEL** (If any) NAME (Last, First, Middle Initial) and ADDRESS (Include ZIP Code)

**b. TELEPHONE** (Include Area Code)

**c. E-MAIL ADDRESS**

**d. FAX NUMBER** (Include Area Code)

**e. I WOULD LIKE ALL CORRESPONDENCE/DOCUMENTS SENT TO ME ELECTRONICALLY.**

☐ YES

☐ NO

**12. APPLICANT MUST SIGN IN ITEM 15 BELOW.** If the record in question is that of a deceased or incompetent person, LEGAL PROOF OF DEATH OR INCOMPETENCY MUST ACCOMPANY THE APPLICATION. If the application is signed by other than the applicant, indicate the name (print) and relationship by marking one box below.

☐ SPOUSE

☐ WIDOW

☐ WIDOWER

☐ NEXT OF KIN

☐ LEGAL REPRESENTATIVE

☐ OTHER (Specify)

**13.a. COMPLETE CURRENT ADDRESS** (Include ZIP Code) OF APPLICANT OR PERSON IN ITEM 12 ABOVE (Forward notification of all changes of address.)

**b. TELEPHONE** (Include Area Code)

**c. E-MAIL ADDRESS**

**d. FAX NUMBER** (Include Area Code)

**14. I MAKE THE FOREGOING STATEMENTS, AS PART OF MY CLAIM, WITH FULL KNOWLEDGE OF THE PENALTIES INVOLVED FOR WILLFULLY MAKING A FALSE STATEMENT OR CLAIM.** (U.S. Code, Title 18, Sections 287 and 1001, provide that an individual shall be fined under this title or imprisoned not more than 5 years, or both.)

**CASE NUMBER**  
(Do not write in this space.)

**15. SIGNATURE** (Applicant must sign here.)

**16. DATE SIGNED**  
(YYYYMMDD)

## PRIVACY ACT STATEMENT

**AUTHORITY:** 10 U.S.C. 1552 and E.O. 9397, as amended (SSN).

**PRINCIPAL PURPOSE(S):** To initiate an application for correction of military record. The form is used by Board members for review of pertinent information in making a determination of relief through correction of a military record. Completed forms are covered by correction of military records SORNs maintained by each of the Services or the Defense Finance and Accounting Service. The DoD Systems of Records Notices can be located at:  
<http://dpclo.defense.gov/Privacy/SORNsIndex/DODComponentNotices.aspx>.

**ROUTINE USE(S):** The DoD Blanket Routine Uses at <http://dpclo.defense.gov/Privacy/SORNsIndex/BlanketRoutineUses.aspx> may apply to this collection.

**DISCLOSURE:** Voluntary. However, failure by an applicant to provide the information not annotated as "optional" may result in a denial of your application. An applicant's SSN is used to retrieve these records and links to the member's official military personnel file and pay record.

**Applicable SORNs:**

Army (<http://dpclo.defense.gov/Privacy/SORNsIndex/DODComponentArticleView/tabid/7489/Article/6000/a0015-185-sfmr.aspx>)

Navy and Marine Corps (<http://dpclo.defense.gov/Privacy/SORNsIndex/DODwideSORNArticleView/tabid/6797/Article/6510/nm01000-1.aspx>)

Air Force (<http://dpclo.defense.gov/Privacy/SORNsIndex/DODwideSORNArticleView/tabid/6797/Article/5904/f036-safpc-d.aspx>)

Defense Finance and Accounting Service (<http://privacy.defense.gov/notices/dfas/T5015a.shtml>)

Coast Guard (<http://www.gpo.gov/fdsys/pkg/FR-2011-10-28/html/2011-27881.htm>)

**Official Military Personnel Files:**

Army (<http://dpclo.defense.gov/Privacy/SORNsIndex/DODwideSORNArticleView/tabid/6797/Article/6131/a0600-8-104-ahrc.aspx>)

Navy (<http://dpclo.defense.gov/Privacy/SORNsIndex/DODwideSORNArticleView/tabid/6797/Article/6405/n01070-3.aspx>)

Marine Corps (<http://dpclo.defense.gov/Privacy/SORNsIndex/DODComponentArticleView/tabid/7489/Article/6775/m01070-6.aspx>)

Air Force (<http://dpclo.defense.gov/Privacy/SORNsIndex/DODwideSORNArticleView/tabid/6797/Article/5876/f036-af-pc-c.aspx>)

Coast Guard (<http://www.gpo.gov/fdsys/pkg/FR-2011-10-28/html/2011-27881.htm>)

## INSTRUCTIONS

Under Title 10 United States Code Section 1552, Active Duty and Reserve Component Service members, Coast Guard, former Service members, their lawful or legal representatives, spouses of former Service members on issues of Survivor Benefit Program (SBP) benefits, and civilian employees with respect to military records other than those related to civilian employment, who feel that they have suffered an injustice as a result of error or injustice in military records may apply to their respective Boards for Correction of Military Records (BCMR) for a correction of their military records. These Boards are the highest level appellate review authority in the military. The information collected is needed to provide the Boards the basic data needed to process and act on the request.

1. All information should be typed or printed. Complete all applicable items. If the item is not applicable, enter "None."
2. If space is insufficient on the front of the form, use the "Remarks" box below for additional information or attach an additional sheet.
3. List all attachments and enclosures in item 9. Do not send original documents. Send clear, legible copies. Send copies of military documents and orders related to your request, if you have them available. Do not assume that they are all in your military record.
4. The applicant must exhaust all administrative remedies, such as corrective procedures and appeals provided in regulations, before applying to the Board of Corrections.
5. ITEM 5. State the specific correction of record desired. If possible, identify exactly what document or information in your record you believe to be erroneous or unjust and indicate what correction you want made to the document or information.
6. ITEM 6. In order to justify correction of a military record, it is necessary for you to show to the satisfaction of the Board by the evidence that you supply, or it must otherwise satisfactorily appear in the record, that the alleged entry or omission in the record was in error or unjust. Evidence, in addition to documents, may include affidavits or signed testimony of witnesses, executed under oath, and a brief of arguments supporting the application. All evidence not already included in your record must be submitted by you. The responsibility of securing evidence rests with you.
7. ITEM 8. U.S. Code, Title 10, Section 1552b, provides that no correction may be made unless a request is made within three years after the discovery of the error or injustice, but that the Board may excuse failure to file within three years after discovery if it finds it to be in the interest of justice.
8. ITEM 10. Personal appearance before the Board by you and your witnesses or representation by counsel is not required to ensure full and impartial consideration of your application. If the Board determines that a personal appearance is warranted and grants approval, appearance and representation are permitted before the Board at no expense to the government.
9. ITEM 11. Various veterans and service organizations furnish counsel without charge. These organizations prefer that arrangements for representation be made through local posts or chapters.
10. ITEM 12. The person whose record correction is being requested must sign the application. If that person is deceased or incompetent to sign, the application may be signed by a spouse, widow, widower, next of kin (son, daughter, mother, father, brother, or sister), or a legal representative that has been given power of attorney. Other persons may be authorized to sign for the applicant. Proof of death, incompetency, or power of attorney must accompany the application. Former spouses may apply in cases of Survivor Benefit Plan (SBP) issues.
11. For detailed information on application and Board procedures, see: Army Regulation 15-185 and [www.arba.army.pentagon.mil](http://www.arba.army.pentagon.mil); Navy - SECNAVINST.5420.193 and [www.hq.navy.mil/bcncr/bcncr.htm](http://www.hq.navy.mil/bcncr/bcncr.htm); Air Force Instruction 36-2603, Air Force Pamphlet 36-2607, and [www.afpc.randolph.af.mil/safmrbr](http://www.afpc.randolph.af.mil/safmrbr); Coast Guard - Code of Federal Regulations, Title 33, Part 52.

## MAIL COMPLETED APPLICATIONS TO APPROPRIATE ADDRESS BELOW

ARMY	NAVY AND MARINE CORPS	AIR FORCE	COAST GUARD
Army Review Boards Agency 251 18th Street South, Suite 385 Arlington, VA 22202-3531	Board for Correction of Naval Records 701 S. Courthouse Road, Suite 1001 Arlington, VA 22204-2490	Board for Correction of Air Force Records SAF/MRBR 550-C Street West, Suite 40 Randolph AFB, TX 78150-4742	Department of Homeland Security Office of the General Counsel Board for Correction of Military Records 245 Murray Lane, Stop 0485 Washington, DC 20528-0485

## 17. REMARKS

**APPLICATION FOR THE REVIEW OF DISCHARGE  
FROM THE ARMED FORCES OF THE UNITED STATES**

*(Please read Privacy Act Statement and Instructions on Pages 3 and 4 BEFORE completing this application.)*

OMB No. 0704-0004  
OMB approval expires  
Dec 31, 2017

The public reporting burden for this collection of information, 0704-0004, is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

**RETURN COMPLETED FORM TO THE APPROPRIATE ADDRESS ON BACK OF THIS PAGE.**

**1. APPLICANT DATA** *(The person whose discharge is to be reviewed).* **PLEASE PRINT OR TYPE INFORMATION.**

<b>a. BRANCH OF SERVICE</b> <i>(X one)</i>	<input type="checkbox"/> ARMY	<input type="checkbox"/> MARINE CORPS	<input type="checkbox"/> NAVY	<input type="checkbox"/> AIR FORCE	<input type="checkbox"/> COAST GUARD
<b>b. NAME</b> <i>(Last, First, Middle Initial)</i>			<b>c. GRADE/RANK AT DISCHARGE</b>		<b>d. SOCIAL SECURITY NUMBER</b>
<b>e. CURRENT MAILING ADDRESS OF APPLICANT OR PERSON NAMED IN ITEM 11</b> <i>(Forward notification of any change in address.)</i>				<b>f. TELEPHONE NUMBER</b> <i>(Include Area Code)</i>	
				<b>g. E-MAIL</b>	
				<b>h. FAX NUMBER</b> <i>(Include Area Code)</i>	

<b>2. DATE OF DISCHARGE OR SEPARATION</b> <i>(YYYYMMDD) (If date is more than 15 years ago, submit a DD Form 149)</i>	<b>4. DISCHARGE CHARACTERIZATION RECEIVED</b> <i>(X one)</i>		<b>5. BOARD ACTION REQUESTED</b> <i>(X all that apply)</i>
	<input type="checkbox"/> HONORABLE	<input type="checkbox"/> CHANGE TO HONORABLE	
	<input type="checkbox"/> GENERAL/UNDER HONORABLE CONDITIONS	<input type="checkbox"/> CHANGE TO GENERAL/UNDER HONORABLE CONDITIONS	
	<input type="checkbox"/> UNDER OTHER THAN HONORABLE CONDITIONS	<input type="checkbox"/> CHANGE TO UNCHARACTERIZED <i>(Not applicable to Air Force or service members with over 6 months of service)</i>	
	<input type="checkbox"/> BAD CONDUCT <i>(Special Court-Martial only)</i>	<input type="checkbox"/> CHANGE NARRATIVE REASON FOR SEPARATION:	
<b>3. UNIT AND LOCATION AT DISCHARGE OR SEPARATION</b>	<input type="checkbox"/> UNCHARACTERIZED		
	<input type="checkbox"/> OTHER <i>(Explain)</i>		

**6. ISSUES: WHY AN UPGRADE OR CHANGE IS REQUESTED AND JUSTIFICATION FOR THE REQUEST** *(Continue in Item 13. See instructions on Page 3.)*

**7. (X if applicable) AN APPLICATION WAS PREVIOUSLY SUBMITTED ON (YYYYMMDD) \_\_\_\_\_ AND THIS FORM IS SUBMITTED TO ADD ADDITIONAL ISSUES, JUSTIFICATION, OR EVIDENCE.**

**8. IN SUPPORT OF THIS APPLICATION, THE FOLLOWING ATTACHED DOCUMENTS ARE SUBMITTED AS EVIDENCE:** *(Continue in Item 14. If military documents or medical records are relevant to your case, please send copies.)*

**9. TYPE OF REVIEW REQUESTED** *(X one)*

<input type="checkbox"/> CONDUCT A RECORD REVIEW OF MY DISCHARGE BASED ON MY MILITARY PERSONNEL FILE AND ANY ADDITIONAL DOCUMENTATION SUBMITTED BY ME. I AND/OR <i>(counsel/representative)</i> WILL NOT APPEAR BEFORE THE BOARD.
<input type="checkbox"/> I AND/OR <i>(counsel/representative)</i> WISH TO APPEAR AT A HEARING AT NO EXPENSE TO THE GOVERNMENT BEFORE THE BOARD IN THE WASHINGTON, D.C. METROPOLITAN AREA.
<input type="checkbox"/> I AND/OR <i>(counsel/representative)</i> WISH TO APPEAR AT A HEARING AT NO EXPENSE TO THE GOVERNMENT BEFORE A TRAVELING PANEL CLOSEST TO <i>(enter city and state)</i> <b>(NOTE: The Naval and Coast Guard Discharge Review Boards do not have traveling panels.)</b>

<b>10.a. COUNSEL/REPRESENTATIVE</b> <i>(If any)</i> <b>NAME</b> <i>(Last, First, Middle Initial)</i> <b>AND ADDRESS</b> <i>(See Item 10 of the instructions about counsel/representative.)</i>	<b>b. TELEPHONE NUMBER</b> <i>(Include Area Code)</i>
	<b>c. E-MAIL</b>
	<b>d. FAX NUMBER</b> <i>(Include Area Code)</i>

**11. APPLICANT MUST SIGN IN ITEM 12.a. BELOW. If the record in question is that of a deceased or incompetent person, LEGAL PROOF OF DEATH OR INCOMPETENCY MUST ACCOMPANY THE APPLICATION. If the application is signed by other than the applicant, indicate the name *(print)* and relationship by marking a box below.**

☐ SPOUSE ☐ WIDOW ☐ WIDOWER ☐ NEXT OF KIN ☐ LEGAL REPRESENTATIVE ☐ OTHER *(Specify)* \_\_\_\_\_

**12. CERTIFICATION.** I make the foregoing statements, as part of my claim, with full knowledge of the penalties involved for willfully making a false statement or claim. *(U.S. Code, Title 18, Sections 287 and 1001, provide that an individual shall be fined under this title or imprisoned not more than 5 years, or both.)*

**CASE NUMBER**  
*(Do not write in this space.)*

<b>a. SIGNATURE - REQUIRED</b> <i>(Applicant or person in Item 11 above)</i>	<b>b. DATE SIGNED - REQUIRED</b> <i>(YYYYMMDD)</i>
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13. CONTINUATION OF ITEM 6, ISSUES (If applicable)

14. CONTINUATION OF ITEM 8, SUPPORTING DOCUMENTS (If applicable)

15. REMARKS (If applicable)

**MAIL COMPLETED APPLICATIONS TO APPROPRIATE ADDRESS BELOW.**

**ARMY**

Army Review Boards Agency  
251 18th Street South  
Suite 385  
Arlington, VA 22202-3531  
(See <http://arba.army.pentagon.mil>)

**NAVY AND MARINE CORPS**

Secretary of the Navy  
Council of Review Boards  
ATTN: Naval Discharge Review Board  
720 Kennon Ave S.E., Suite 309  
Washington Navy Yard, DC 20374-5023

**AIR FORCE**

Air Force Review Boards Agency  
SAF/MRBR  
550-C Street West, Suite 40  
Randolph AFB, TX 78150-4742

**COAST GUARD**

Commandant (CG-133)  
Attn: Office of Military Personnel  
US Coast Guard Stop 7907  
2703 Martin Luther King, Jr. Ave., S.E.  
Washington, DC 20593-7907

## PRIVACY ACT STATEMENT

**AUTHORITY:** 10 U.S.C. 1553, Review of Discharge or Dismissal; DoD Instruction 1332.28, Discharge Review Board (DRB) Procedures and Standards; and E.O. 9397 (SSN), as amended.

**PRINCIPAL PURPOSE(S):** To apply for a change in the characterization or reason for military discharge issued to an individual. The appropriate Military Service Discharge Review Board reviews submitted packages and makes determinations. Completed forms are covered by the correction of discharge review board and official military records SORNs maintained by each of the Military Services. The DoD Systems of Records Notices can be located at <http://dpcld.defense.gov/Privacy/SORNsIndex/DODComponentNotices.aspx>.

**ROUTINE USE(S):** The DoD Blanket Routine Uses found at <http://dpcld.defense.gov/Privacy/SORNsIndex/BlanketRoutineUses.aspx> may apply to this collection.

**DISCLOSURE:** Voluntary. However, failure to provide identifying information may impede processing of this application. The SSN is used by the Military Services to ensure the correct individual's official military personnel file is updated.

### Applicable SORNs:

Discharge Review Board Records:

Army (<http://dpcld.defense.gov/Privacy/SORNsIndex/DODwideSORNArticleView/tabid/6797/Article/6000/a0015-185-sfmr.aspx>)

Navy/Marine Corps (<http://dpcld.defense.gov/Privacy/SORNsIndex/DODwideSORNArticleView/tabid/6797/Article/6510/nm01000-1.aspx>)

Air Force (<http://dpcld.defense.gov/Privacy/SORNsIndex/tabid/5915/Article/5899/f036-safcb-a.aspx>)

Coast Guard (<http://www.gpo.gov/fdsys/pkg/FR-2011-10-28/html/2011-27881.htm>)

### Official Military Personnel Files:

Army (<http://dpcld.defense.gov/Privacy/SORNsIndex/DODwideSORNArticleView/tabid/6797/Article/6131/a0600-8-104-ahrc.aspx>)

Navy (<http://dpcld.defense.gov/Privacy/SORNsIndex/DODwideSORNArticleView/tabid/6797/Article/6405/n01070-3.aspx>)

Marine Corps (<http://dpcld.defense.gov/Privacy/SORNsIndex/DODComponentArticleView/tabid/7489/Article/6775/m01070-6.aspx>)

Air Force (<http://dpcld.defense.gov/Privacy/SORNsIndex/DODwideSORNArticleView/tabid/6797/Article/5876/f036-af-pc-c.aspx>)

Coast Guard (<http://www.gpo.gov/fdsys/pkg/FR-2011-10-28/html/2011-27881.htm>)

## INSTRUCTIONS FOR COMPLETION OF DD FORM 293

### REQUESTING COPIES OF YOUR OFFICIAL MILITARY PERSONNEL FILE

Information on how to obtain military or health records is available at the National Personnel Records Center website at [www.nara.gov/regional/mpr.html](http://www.nara.gov/regional/mpr.html) or at your local Veterans Administration office.

Applicants are strongly encouraged to submit any request for their military records prior to applying for a discharge review rather than after submitting a DD Form 293 in order to avoid substantial delays in processing of the application and scheduling of review. Applicants and their counsel may also examine their military personnel records at the site of their scheduled review prior to the review. The Board shall notify applicants of the date of availability of the records for examination in their standard scheduling information.

Submission of a request for an applicant's military records (including a request pursuant to the Freedom of Information Act or Privacy Act) after the DD Form 293 has been submitted will automatically result in the suspension of processing of the application for discharge review until the requested records are sent to an appropriate location for copying, are copied, and are returned to the possession of the headquarters of the Discharge Review Board. Processing of the application shall then be resumed at whatever stage of the discharge review process is practicable.

**DD FORM 293 - PLEASE PRINT OR TYPE INFORMATION.** (Items on the form are self-explanatory unless otherwise noted below.)

**ITEM 1b.** Use the name which you served under while in the Armed Forces. If your name has since changed, then also include your current name after adding the abbreviation "AKA". If the former member is deceased or incompetent, see Item 11.

**ITEM 1e.** Indicate the address to be used for all future correspondence regarding this application. If you change this address while this application is pending, you must notify the Discharge Review Board immediately. Failure to attend a hearing as a result of an unreported change in address may result in a waiver of your right to a hearing.

**ITEM 2.** If you received more than one discharge, the information in this item should refer to the discharge that you want changed. Discharge Review Boards cannot consider any type of discharge resulting from a sentence given by a general court-martial.

**ITEM 3.** If the discharge you want reviewed was issued over 15 years ago, instead of applying on a DD Form 293, you must petition the appropriate Board for Correction of Military Record using DD Form 149, Application for Correction of Military Record Under the Provisions of Title 10, U.S. Code, Section 1552.

**ITEM 5.** If you request a change of narrative reason for separation, you must list the specific reason for discharge that you believe to be appropriate, otherwise the Board will presume that you do not want a change in reason for discharge. If you do not request a change of discharge characterization in this item, the Board will presume you want to change discharge to Honorable.

If you were separated on or after 1 October 1982 while in an entry level status with an under other than honorable conditions discharge and less than 180 days of active service, you can request a change of discharge characterization to "Uncharacterized" and discharge reason to "Entry Level Separation".

**ITEM 6.** "Issues" are the reasons why you think your discharge should be changed. You are not required to submit any issues with your application. However, if you want the Board to respond in writing to the issues of concern, you must list your specific issues in accordance with those instructions and regulations governing the Board. Issues must be stated clearly and specifically. Your issues should address the reasons why you believe that the discharge received was improper or inequitable. It is important to focus on matters that occurred while you served in the Armed Forces.

The following examples demonstrate one way in which issues may be stated (the example issues do not indicate, in any way, the only type of issues that should be submitted to the Board):

Example 1. My discharge was inequitable because it was based on one isolated incident in 28 months of service with no other adverse action.

## INSTRUCTIONS FOR COMPLETION OF DD FORM 293 (Continued)

### ITEM 6. ISSUES (Continued)

Example 2. The discharge is improper because the applicant's pre-service civilian conviction, properly listed on his enlistment documents, was used in the discharge proceedings.

In Item 6 list each of your issues that you want the Board to address. There is no limit to the number of issues that you may submit. If you need additional space, continue in Item 14 or on a plain sheet of paper and attach it to this application.

**NOTE:** If an issue is not listed in Item 6, it may result in the Board not addressing the issue even if the issue is discussed in a legal brief or other written submissions or at the hearing. Changes or additions to the list may be made on the DD Form 293 anytime before the Discharge Review Board closes the review process for deliberation. Please be sure that your issues are consistent with the Board Action Requested (Item 5). If there is a conflict between what you say in your issues and what you requested in Item 5, the Board will respond to your issue in the context of the action requested in Item 5. For example, if you request a General Discharge in Item 5 but your issue in Item 6 indicated you want an Honorable Discharge, the Board will respond to the issue in terms of your request for a General Discharge. Therefore, if you are submitting issues for the purpose of obtaining an Honorable Discharge, be sure to mark the box for an Honorable Discharge in Item 5.

**Incorporation by Reference.** Issues that are listed on a legal brief or other written submissions may be incorporated by reference in Item 6. The reference must be specific enough for the Board to clearly identify the matter being submitted as an issue. At a minimum, it shall identify the page, paragraph, and sentence incorporated.

Example: Issue 1. Brief, page 2, paragraph 1, sentences one and two.

Applicants should be as specific as possible with all references so the Board can clearly distinguish the scope of the issue. Because it is to your benefit to bring such issues to the Board's attention as early as possible in the review, if you submit a brief, you are strongly urged to set forth all such issues as a separate item at the beginning of the brief.

**ITEM 8.** Evidence not in your official records should be submitted to the Board before the review date. It is to your advantage to submit such documentation with this application. This also applies to legal briefs or counsel submissions. However, you have the right to submit evidence until the time the Discharge Review Board closes the review process for deliberation. Documents that are of the most benefit are those which substantiate or relate directly to your issues in Item 6. Other documents that may be helpful are character references, criminal, credit and employment reports, educational achievements, exemplary post-service conduct, and medical reports. You should add your name and Social Security Number to each document submitted. The Board will consider all documents submitted in your behalf, but will respond in writing only to those issues set forth in Item 6.

### ITEM 9. TYPE OF REVIEW REQUESTED

A Discharge Review is conducted in two basic ways: (1) Records Review or (2) Hearing.

1. **Records Review.** You may have the Board conduct a discharge review based solely on military records and any additional documentation that you provide. This review is conducted without personal appearance by you and/or your counsel appearing. A personal appearance hearing can be requested, however, you forfeit your right to a record review.

### ITEM 9. TYPE OF REVIEW REQUESTED (Continued)

2. **Hearing.** You may appear personally (alone or assisted by a representative/counsel) before the Board in the Washington, D.C. Metro Area or before a Traveling Panel of the Board in selected locations throughout the U.S., if appropriate. The Department of Defense is not responsible for, nor will it pay for, any costs incurred by the applicant or representative/counsel for appearance or providing testimony or documentation. Detailed notification and/or scheduling information for all personal appearances will be provided after the application has been processed. In addition, without appearing yourself, you may have your case presented by a representative/counsel of your choice. **NOTE: The Naval and Coast Guard Discharge Review Boards do not have traveling panels.**

Applicants participating in a personal appearance or hearing examination may make sworn or unsworn statements, introduce witnesses, documents, or other information on their behalf. Applicants may make oral or written arguments personally and/or through representative/ counsel. Applicants and witnesses who present sworn or unsworn statements may be questioned by the Board.

### FAILURE TO APPEAR AT A HEARING OR RESPOND TO A

**SCHEDULING NOTICE.** If you do not appear at a scheduled hearing or respond as required to a scheduling notice, and you did not make a prior, timely request for a continuance, postponement, or withdrawal of the application, you will forfeit the right to a personal appearance and the Board shall complete its review of the discharge based upon the evidence of record.

**ITEM 10.a - d.** Omit if you do not have a representative/counsel. If you later obtain the services of either, inform the Board immediately.

The military services do not provide counsel representation or evidence for you, nor do they pay the cost of such representation under any circumstance. The following organizations regularly furnish representation at no charge to you. Representatives may or may not be lawyers.

1. American Legion
2. Disabled American Veterans
3. State or Regional Veterans Offices

In addition, there are other organizations willing to assist you in completing this application and to provide representation at no cost. It is to your advantage to coordinate with your counsel prior to submitting this application. This will insure that your counsel is able to appear at the location you listed in Item 9. Please note that some of the organizations listed above only represent applicants who appear before the Board in the Washington, D.C. Metro Area. Contact your local veterans affairs office, Veterans Administration Office or veterans service organization for further information.

**ITEM 11.** If the former member is deceased or incompetent, the application may be submitted by the next of kin, a surviving spouse or a legal representative. Legal proof of death or incompetency and satisfactory evidence of the relationship to the former member must accompany this application.

**ITEM 12.a. and b.** A signature and date entered by the applicant or person identified in Item 11 are required.



Department of Veterans Affairs

**VA DATE STAMP**  
 (DO NOT WRITE  
 IN THIS SPACE)

**NOTICE TO DEPARTMENT OF VETERANS AFFAIRS OF VETERAN OR  
 BENEFICIARY INCARCERATED IN PENAL INSTITUTION**

**NOTE:** Pursuant to Title 38, U.S.C., 1505, 3482, 3680 and 5313, awards of Department of Veterans Affairs benefits for veterans and beneficiaries are subject to adjustment or discontinuance while such persons are incarcerated.

<b>TO</b>		<b>FROM</b>	NAME AND ADDRESS OF INSTITUTION
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**SECTION I: IDENTIFICATION INFORMATION**

**NOTE:** You can *either* complete the form online or by hand. Please print the information requested in ink, neatly, and legibly to help process the form.

2. VETERAN/BENEFICIARY's NAME (First, Middle Initial, Last)			
<div style="display: flex; border-bottom: 1px solid black; height: 20px; width: 100%;"></div>			
3. SOCIAL SECURITY NUMBER		4. VA FILE NUMBER	
<div style="display: flex; border-bottom: 1px solid black; height: 20px; width: 100%;"></div>		<div style="display: flex; border-bottom: 1px solid black; height: 20px; width: 100%;"></div>	
5. VETERAN'S DATE OF BIRTH (MM/DD/YYYY)			
<div style="display: flex; justify-content: space-between; align-items: center;"> <div>Month</div> <div>Day</div> <div>Year</div> </div> <div style="display: flex; border-bottom: 1px solid black; height: 20px; width: 100%;"></div>			
6. VETERAN'S SERVICE NUMBER (If applicable)		7. RELATIONSHIP TO VETERAN	
<div style="display: flex; border-bottom: 1px solid black; height: 20px; width: 100%;"></div>			

**SECTION II: INFORMATION ABOUT INCARCERATION**

8. DATE OFFENSE WAS COMMITTED (MM/DD/YYYY)		9. TYPE OF OFFENSE FOR WHICH COMMITTED		10. DATE OF CONFINEMENT FOLLOWING CONVICTION (MM/DD/YYYY)	
<div style="display: flex; justify-content: space-between; align-items: center;"> <div>Month</div> <div>Day</div> <div>Year</div> </div> <div style="display: flex; border-bottom: 1px solid black; height: 20px; width: 100%;"></div>		<input type="checkbox"/> FELONY <input type="checkbox"/> MISDEMEANOR		<div style="display: flex; justify-content: space-between; align-items: center;"> <div>Month</div> <div>Day</div> <div>Year</div> </div> <div style="display: flex; border-bottom: 1px solid black; height: 20px; width: 100%;"></div>	
11. LENGTH OF SENTENCE			12. SCHEDULED RELEASE DATE (MM/DD/YYYY)		
<div style="display: flex; border-bottom: 1px solid black; height: 20px; width: 100%;"></div>			<div style="display: flex; justify-content: space-between; align-items: center;"> <div>Month</div> <div>Day</div> <div>Year</div> </div> <div style="display: flex; border-bottom: 1px solid black; height: 20px; width: 100%;"></div>		
13A. IS INDIVIDUAL IN A WORK RELEASE OR HALFWAY HOUSE PROGRAM?			13B. DATE ENTERED PROGRAM (MM/DD/YYYY)		
<input type="checkbox"/> YES <input type="checkbox"/> NO			<div style="display: flex; justify-content: space-between; align-items: center;"> <div>Month</div> <div>Day</div> <div>Year</div> </div> <div style="display: flex; border-bottom: 1px solid black; height: 20px; width: 100%;"></div>		

**SECTION III: REMARKS**



VETERAN'S SOCIAL SECURITY NO.

				-											
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REMARKS (Continued)

## SECTION IV: SIGNATURE OF OFFICIAL

14. NAME AND TITLE OF INSTITUTIONAL OFFICIAL

15. DATE SIGNED (MM/DD/YYYY)

16. SIGNATURE OF INSTITUTIONAL OFFICIAL (Sign in ink)

17. INSTITUTION TELEPHONE NUMBER  
(Include Area Code)

**PRIVACY ACT INFORMATION:** VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of VA benefits, verification of identity and status, and personnel administration) as identified in the VA system of records, 58VA21/22/28, Compensation Pension, Education, and Vocational Rehabilitation and Employment Records - VA, published in the Federal Register. Your obligation to respond is voluntary. Information submitted is subject to verification through computer matching programs with other agencies.

**RESPONDENT BURDEN:** We need this information to determine the adjustment or discontinuance of VA benefits for veterans and beneficiaries who are incarcerated. Title 38, United States Code 1505, 3482, 3680, and 5313, allows us to ask for this information. We estimate that you will need an average of 15 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at <http://www.reginfo.gov/public/do/PRAMain>. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.



# DEPARTMENT OF VETERANS AFFAIRS

## Where to Send Your Written Correspondence

In order to properly determine where to send your written correspondence, please first identify your benefit type (Compensation, Veterans Pension, or Survivors Benefits); then, locate the corresponding address based on your location of residence.

For correspondence relating to all **Compensation** claims:

Location of Residence	Address
<b>All United States and Foreign Locations</b>	Department Of Veterans Affairs Evidence Intake Center <b>P.O. Box 4444</b> Janesville WI 53547-4444  Or fax your information to: Toll Free: 844-531-7818 Local: 248-524-4260
*Note: For foreign Veterans Pension and Survivors Benefits please refer to the below addresses.	

For correspondence relating to all **Veterans Pension** and **Survivors Benefits** claims:

Location of Residence	Address
Alabama      Kentucky      Missouri Arkansas      Louisiana      Ohio Illinois      Michigan      Tennessee Indiana      Mississippi      Wisconsin	Department Of Veterans Affairs Claims Intake Center Attention: Milwaukee Pension Center <b>P.O. Box 5192</b> Janesville WI 53547-5192 Or Fax your information to: Toll Free: (844) 655-1604
Alaska      Montana      Texas Arizona      Nebraska      Utah California      Nevada      Washington Colorado      New Mexico      Wyoming Hawaii      North Dakota      Mexico Idaho      Oklahoma      Central America Iowa      Oregon      South America Kansas      South Dakota      Caribbean Minnesota	Department Of Veterans Affairs Claims Intake Center Attention: St. Paul Pension Center <b>P.O. Box 5365</b> Janesville WI 53547-5365 Or fax your information to: Toll Free: (844) 655-1604
Connecticut      New Hampshire      South Carolina Delaware      New Jersey      Vermont Florida      New York      Virginia Georgia      North Carolina      West Virginia Maine      Pennsylvania      District of Columbia Maryland      Rhode Island      Puerto Rico Massachusetts      Canada	Department Of Veterans Affairs Claims Intake Center Attention: Philadelphia Pension Center <b>P.O. Box 5206</b> Janesville WI 53547-5206 Or fax your information to: Toll Free: (844) 655-1604
Countries outside of North, Central or South America	

# REQUEST FOR INFORMATION NEEDED TO RECONSTRUCT MEDICAL DATA

The medical record needed to answer your request is not in our files. If the record were here on July 12, 1973, it would have been in the area that suffered the most damage in the fire on that date and may have been destroyed.

Some medical records were transferred to the Department of Veterans Affairs, formerly the Veterans Administration (VA), before the 1973 fire. The VA would have obtained the record to process a claim for benefits based on a service-connected injury or illness, and if so, the record should still be available from the VA. If you believe that such a claim was filed with the VA before July 1973, you should request the medical record by calling your nearest VA facility at 1-800-827-1000.

If the medical record was not transferred to the VA, there are also some alternate record sources available which often contain information concerning illness or injury while in the military service. One limited source of such information pertains to treatment received primarily at Army hospitals during some years from 1942 through 1954. If such information is available on the person named in this request, it is attached. If such information is not available, or it is attached and you find that it does not meet your needs, we will attempt to use other alternate sources. Please note, however, that these other alternate sources usually show only dates of treatment or hospitalization and rarely show diagnosis or treatment given.

To enable us to search secondary sources, please provide the information requested below. We need to know the exact month(s) as well as the year of treatment; the year alone is not enough. If you don't know the exact month, then please tell us the season and year.


NAME OF PATIENT USED AT TIME OF TREATMENT		SERVICE NO.	SOCIAL SECURITY NO.		BRANCH OF SERVICE
NATURE OF ILLNESS, INJURY OR TREATMENT	TREATMENT DATES FROM (MO/YR) TO (MO/YR)	CHECK ONE IN-PATIENT	OUT-PATIENT	ORGANIZATION TO WHICH ASSIGNED (Furnish specific units to include company, battalion, regiment, squadron, group, wing, etc.)	NAME AND LOCATION OF HOSPITAL, DISPENSARY OR MEDICAL FACILITY WHERE TREATED

To provide the information requested we must have the signature of the person whose records are involved. If the person is deceased, the next of kin must sign and provide proof of death and evidence of kinship. For release purposes the next of kin is defined as any of the following: unremarried widow or widower; son or daughter; father or mother; brother or sister. If the person is legally incompetent, the court-appointed guardian must sign and furnish a copy of the court order adjudging incompetence and appointing the guardian.

## RELEASE AUTHORIZATION:

I hereby authorize release of the requested information/documents to the person indicated at right.

## VETERAN SIGN HERE:

  
(If signed by other than veteran show relationship to veteran)

DATE OF REQUEST: \_\_\_\_\_

Please type or print clearly **COMPLETE RETURN ADDRESS** (to be mailed to)

(name)

(street number)

(city)

(state)

(zip code)

E-MAIL ADDRESS

Daytime Phone No. with area code ( )

Date

Prepared by

AFN-M

NATIONAL PERSONNEL RECORDS CENTER  
(Military Personnel Records)  
1 Archives Drive  
St. Louis, MO 63138-1002

**PRIVACY ACT OF 1974 COMPLIANCE INFORMATION**

The following information is provided in accordance with 5 U.S.C. 552a(e)(3) and applies to this form. Authority for collection of the information is 44 USC 2907, 3101, 3103 and Public Law 104-134 (April 26, 1996), as amended in title 31, section 7701. Disclosure of the information is voluntary. If the requested information is not provided, it may delay servicing your inquiry because the National Personnel Records Center may not have all of the information needed to locate the record(s) sought. The purpose of the information on this form is to assist the National Personnel Records Center in locating the correct military service record(s) or information to answer your inquiry. This form is then filed in the requested military service record as a record of disclosure. The form may be further disclosed with the military record to (1) a "Routine Use" as defined in the Privacy Act of 1974, 5 U.S.C. 552a (a)(7), and as published by the Department of Defense, the military service departments, and the Department of Homeland Security (DHS, U.S. Coast Guard) in the Federal Register; (2) other individuals or offices who present written authorization of the veteran, the veteran's next of kin when the veteran is deceased, the veteran's legal representative officially designated in writing, or a legal guardian when the veteran has been declared incompetent; or (3) pursuant to the order of a court of competent jurisdiction.

**PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT**

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. The information requested on this form is being collected and used by the National Personnel Records Center to identify and locate military service records that could not be identified and located in response to the original inquiry. Public burden reporting for this collection of information is estimated to be five minutes per response, including time for reviewing instructions and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to National Archives and Records Administration (NHP), 8601 Adelphi Road, College Park, MD 20740-6001. **DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. SEND COMPLETED FORMS TO THE ADDRESS SHOWN ON PAGE 1.**

## QUESTIONNAIRE ABOUT MILITARY SERVICE

**1. WHY WE ARE SENDING YOU THIS FORM:** We are unable to locate a record with the information provided in your original inquiry **OR** the record needed to answer your inquiry was lost in the July 1973 fire that destroyed millions of records at the National Personnel Records Center. The records stored in the area which suffered the most damage in the fire were those of Army veterans discharged or deceased between November 1, 1912, and December 31, 1959, **AND** Air Force veterans discharged, deceased, or retired before January 1, 1964, whose names come alphabetically after Hubbard, James E.

The information you provide on page 2 of this form may help locate the record, if it is available; or, if the record is not available, it may enable the Center to make use of various alternate sources to reconstruct some of the basic service record data. Please note that if the *only* document you need is the Report of Separation (DD Form 214, WDAGO Form 53-55, etc.), it may be available from a former employer or from the recorder's office of the city or county where the veteran lived just after separation/discharge.

### 2. WHAT YOU NEED TO DO:

- ☐ Fill out page 2 of this form (NA Form 13075) as completely as possible, as well as any other form(s) you may have received with this one, such as Standard Form (SF) 180 and NA Form 13055;
- ☐ Attach copies of any papers you have that relate to the requested military service, such as military orders, award citations, and military addresses as shown on letters mailed home; and
- ☐ Send the above item(s) to the National Personnel Records Center at the address shown below or fax to (314) 801-9195. If we do not receive this information from you within 30 days, your request will be closed without further reply.

**3. FEE FOR ARCHIVAL RECORDS:** A fee is often required for copies of documents from an archival record. An archival record is one that was transferred to the legal custody of the National Archives and Records Administration (NARA) 62 years after the subject of the record was discharged or retired, or died in service. Archival records are open to the public. Access to archival records does not require written authorization from the veteran or next-of-kin. You will be notified if there is a charge associated with information from the record you are requesting.

**4. MEDALS INFORMATION:** Are you requesting military service medals only? If so, do you have a copy of the Report of Separation (DD Form 214, WDAGO Form 53-55, etc.) and other military papers that show which medals were earned? If you send such information about medals, you do not need to fill out this NA Form 13075; however, you must return page 2 (with the barcode) so that we can locate your original request. Finally, if possible, please send a list of the names and locations of all military units or "outfits" to which the veteran was assigned, including dates, while on active duty. This may help determine eligibility for "unit" awards.

**Special provisions when a record is archival:** Only requests from veterans for replacements of awards will be processed without a fee. All other requesters will be given the opportunity to purchase copies of available archival records in the custody of the National Archives and Records Administration (NARA). We will not verify entitlement to medals, provide specific documents, or extract awards information for anyone other than the veteran when the record is archival.

### PRIVACY ACT OF 1974 COMPLIANCE INFORMATION

The following information is provided in accordance with 5 U.S.C. 552a(e) (3) and applies to this form. Authority for collection of the information is 44 U.S.C. 2907, 3101, and 3103, and Public Law 104-134 (April 26, 1996), as amended in title 31, section 7701. Disclosure of the information is voluntary. If the requested information is not provided, it may delay servicing your inquiry because the National Personnel Records Center may not have all of the information needed to locate the record(s) sought. The purpose of the information on this form is to assist the National Personnel Records Center in locating the correct military service record(s) or information to answer your inquiry. This form is then filed in the requested military service record as a record of disclosure. The form may be disclosed to the Department of Defense components or the Department of Homeland Security (DHS, U.S. Coast Guard), if the National Personnel Records Center transfers all or part of those records to such agency. If the service member was a member of the National Guard, the form may be disclosed to the Adjutant General of the appropriate state, District of Columbia, or Puerto Rico, where he or she served. The form may also be disclosed when the military service member or, in the case of a deceased service member, the military service department, authorizes a specific individual or organization to have access to the military service record.

### PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. The information requested on this form is being collected and used by the National Personnel Records Center to identify and locate military service records that could not be identified and located in response to the original inquiry. Public burden reporting for this collection of information is estimated to be five minutes per response, including time for reviewing instructions and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to National Archives and Records Administration (NHP), 8601 Adelphi Road, College Park, MD 20740-6001. **DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. SEND COMPLETED FORMS TO THE ADDRESS BELOW.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Prepared by  
AFN-M \_\_\_\_\_

NATIONAL PERSONNEL RECORDS CENTER  
(Military Personnel Records)  
1 Archives Drive  
St. Louis, MO 63138-1002

**QUESTIONNAIRE ABOUT MILITARY SERVICE***Please complete this form to the best of your ability.*Name(s) used during service (and nicknames, if any):  
Last First Middle

Branch of Service:

☐ Army ☐ Air Force ☐ Navy  
☐ Marine Corps ☐ Coast Guard

Veteran's Social Security Number:

Date of Birth:

City and State (Country) of Birth:

Served as:

☐ Officer☐ Enlisted

If enlisted:

☐ volunteered ☐ draftedWas service six months active duty for training only? ☐ Yes ☐ No

Final Rank:

Serial/Service number(s):

Home Address:

When entered service:

Street

City

County

State

When released from active duty:

City

County

State

Selective Service:

Local Board Number

City

State

Veteran's Selective Service Number

Names of close relatives when military service began (parents, siblings, spouse, children):

Place of Enlistment or Induction (where veteran took oath of service, such as examining station, reception center, or place of basic training.) Show name of military facility, city, state:

Month/Day/Year began active duty:

Place of basic training and month/day/year began (if different from place and date shown on line above):

Type of military assignment (infantry, airborne, engineer, bombers, fighters, supply, maintenance, food service, etc.):

Last military organization and location (show full unit designations, such as army, division, regiment, battalion, company):

Separation Station (if this service member was released at a separation station after leaving the last "permanent" organization or "unit", include location of separation station):

Date Released from Active Duty  
(Month/Day/Year):

Month/Day/Year of any reenlistment(s) (include full designation and location of unit to which assigned at that time):

Date of Death (if veteran is deceased):

Did the veteran ever:

a. File a claim for VA benefits? ☐ No ☐ Yes ☐ Don't Know If yes, show VA Claim Number: \_\_\_\_\_b. Serve in the Reserves after release from active duty period shown above? ☐ No ☐ Yes ☐ Don't Know If yes, show branch of service \_\_\_\_\_  
show mo/yr from \_\_\_\_\_ to \_\_\_\_\_c. Receive a state bonus for military service? ☐ No ☐ Yes ☐ Don't Know If yes, show state \_\_\_\_\_ mo/yr paid \_\_\_\_\_d. Serve in the National Guard? ☐ No ☐ Yes ☐ Don't Know If yes, show state \_\_\_\_\_ ☐ Army ☐ Air  
show mo/day/yr from \_\_\_\_\_ to \_\_\_\_\_e. Retire from any military service branch? ☐ No ☐ Yes ☐ Don't Know If yes, show branch of service \_\_\_\_\_  
show mo/yr retired \_\_\_\_\_f. Spend time on the Temporary Disability Retired List (TDRL)? ☐ No ☐ Yes ☐ Don't Know If yes, show branch of service \_\_\_\_\_  
show mo/day/yr from \_\_\_\_\_ to \_\_\_\_\_g. Serve active duty in any other military service branch in later years? ☐ No ☐ Yes ☐ Don't Know If yes, show branch of service \_\_\_\_\_  
show mo/day/yr from \_\_\_\_\_ to \_\_\_\_\_h. Work for the Federal Government as a civilian? ☐ No ☐ Yes ☐ Don't Know If yes, show agency name \_\_\_\_\_  
show city/state \_\_\_\_\_  
show mo/day/yr from \_\_\_\_\_ to \_\_\_\_\_

Purpose: (Optional - An explanation of the purpose of this request is strictly voluntary.)

Relationship to veteran in question:

SIGNATURE:

TODAY'S  
DATE:DAYTIME  
PHONE NUMBER: ( )