



ELKS VOLUNTARY SERVICE PROGRAM
2750 N. Lakeview Ave.
Chicago, IL 60614-1889
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ELKS NATIONAL VETERANS SERVICE COMMISSION ALLOCATION INCREASE REQUEST FORM

Please complete this form to officially request an increase in allocation for an existing facility. Please attach a copy of the latest bank statement along with this form.

The amount of funding usually depends on the size of the facility and how many patients are served. Outpatient clinics and smaller facilities generally receive the minimum, currently \$125.00 per month.

After research on the local level, the ENVSC State Chair must approve the proposal, which is sent to the State President and State Sponsor for approval. Once these approvals are obtained, the ENVSC State Chair should submit the proposal to the Chicago ENVSC office.

Allocation increase proposals are considered twice a year, at the Elks National Veterans Service Commission's bi-annual board meetings. These meetings take place in early February and early July. If approved by a majority vote of the Commission, our headquarters will notify the State Veterans Chair and State President.

All funds granted through the VA Voluntary Service Program, aka the Elks Voluntary Service Program, must be used to serve the veterans at your assigned facility. They may not be used for other causes.

Date: _____

Facility Information

Facility: _____ Current Representative: _____

Are there any active Deputy Representatives? If yes, how many? _____

Current allocation amount: _____ Amount currently in your VAVS account: _____

Does your State or Lodge currently provide you with funds to serve this facility? _____

If so, how much per month (on average)? _____

Please indicate the new requested allocation amount below.

Requested allocation amount: _____

Why is this facility in need of additional funding at this time? Please explain the circumstances/ situation. For example, has it recently expanded or changed? Does it serve more veterans than in the past?

How will the additional funds expand services at this specific facility? For example, do you plan to start a new monthly event? Do you plan to serve more veterans at an existing event? Do you plan to expand services to veterans in a different area of this facility?

Please give examples of budget items of what the additional funds will be spent on each month.

Item	Cost

Please note that past reports filed for this facility will be considered alongside the information on this form. Completing this request does not guarantee approval for an increased allocation. Approval is subject to budget constraints, need for additional funds, and Elk involvement in the activities these funds are used for.

Approval of Allocation Increase Request By: (Signatures required, electronic approval also accepted)

State Sponsor: _____ Date: _____

State President: _____ Date: _____

State ENVSC Chair: _____ Date: _____