

VETERANS RELIEF COMMITTEE



VFW POST 4031



ELKS LODGE 507



AMERICAN LEGION POST 28

LOCAL COLLABORATION FOCUSED ON
SUPPORTING VETERANS AND THEIR FAMILIES

DGOVETHelp@GMAIL.COM

VETERAN CAR GIVEAWAY ENTRY FORM

Date: _____ Date of Birth: _____

First Name: _____ MI: _____ Last Name: _____

Mailing Address: _____

Email: _____

Phone(s): _____

Driver's License #: _____ State: _____ Expiration: _____

Permission to Obtain Driving Record: Sign Here: _____

Note: DD214 or other supporting documentation of military service must be attached.

Number of dependents living in your household: _____

Ages of dependents: _____

Are you receiving compensation/benefits of any kind from the government? YES NO

If so, please explain: _____

Have you previously applied for help from another non-profit organization? YES NO

If so, name of organization and date applied: _____

In the event you are chosen to receive the car, do you understand you are required to obtain and hold vehicle insurance, as well as keep the vehicle registered? YES NO

