



Delaware County Veteran Service Office
Historic Court House - Ground Floor
91 N Sandusky St, Delaware OH 43015

For Office Use Only:
This request is ____ of 4 Annual Requests
Is this a Needs Based Request: _____
Is the Lifetime Award > \$7,500.00: _____
F/A ____ Dental ____ Vision ____

Addendum

Name (First - Last)

Last Four of Social Security Number

Please explain how did Veteran Services help you with the previous funds given?

Please tell us why you need additional assistance (Required)

Printed Name Signature Date