



U MATTER 2, INC.

18890 5th Rd.

PLYMOUTH, INDIANA 46563

a Not for Profit 501 C 3 Organization

REQUEST FOR AID/ ASSISTANCE

We cannot move forward with your request without the documentation below!

Directions: To assist you in your need, The board needs to determine to what extent we may render aid, or other needs. Completely fill out the form below. Please attach your DD-214 or other separation documentation along with this form. You may email this form along with any other documentation to support your request to UMatter2022@yahoo.com Phone: 574-327-8095

NAME _____ DATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

TELEPHONE _____ CELL PHONE _____

EMAIL _____

Number of people living with you: _____ List Name, and relationship: _____

What is the amount you seek: \$ _____ Are there any members in the household employed? Yes No

If so: Monthly NET income: _____ Total monthly NET income within the entire household? \$ _____
(employment, SSI, SS, VA)

Monthly Mortgage / Rent Payment: _____ Monthly Utilities: _____

Are there any extraordinary expenses? Yes No If Yes Please list: _____

Please list any and all financial aid you are receiving from VA, County, City, State or Federal agencies. _____

Briefly describe the need you would like to receive: _____

Applicant Signature _____ (Print)

Applicant Signature _____ (Sign)

Administrative Purposes Only

Date Received _____

Received DD 214 _____

Y N

Date Approved / Denied _____

Award Provided _____

SIGNATURES

President _____ Date _____

Vice President _____ Date _____

Director _____ Date _____

Treasurer _____ Date _____

Media Relations Officer (PRO) _____ Date _____