



Dear Veterans Service Organizations,

Under the provisions of Wisconsin Statute § 45.41, the Wisconsin Department of Veterans Affairs (WDVA) is accepting applications from state veterans service organizations for the Veterans Service Organization (VSO) Grant.

The provisions of the program require the WDVA to make each grant payment to an eligible VSO in an amount equal to 50 percent of all salaries and travel expenses during the previous fiscal year for those employees engaged in veterans' claim service at the VA Regional Office (VARO) or \$100,000, whichever is less. If the sum of payments payable should exceed the amount of funds appropriated, the WDVA must prorate the funds among the VSOs receiving payment.

Enclosed, please find the VSO Grant application packet which includes three documents comprising the application packet. The VSO Grant application packet is also available online at [http://dva.state.wi.us/Documents/newsMediaDocuments/WDVA%20Toolkit/WDVA\\_0057\\_Veteran\\_Service\\_Organization\\_Grant\\_Packet.docx](http://dva.state.wi.us/Documents/newsMediaDocuments/WDVA%20Toolkit/WDVA_0057_Veteran_Service_Organization_Grant_Packet.docx).

Completed applications must be received by the WDVA or postmarked no later than **April 30, 2021**.

The Application and Grant Agreement must bear the VSO's name inserted in the appropriate places, and signatures of the appropriate VSO official and the State Service Officer.

Application materials can be scanned and emailed to [VetsBenefitsGrants@dva.wisconsin.gov](mailto:VetsBenefitsGrants@dva.wisconsin.gov) (preferred). Please use "2021 VSO Grant" in the subject line. Applications may also be mailed to the WDVA address listed on the application or faxed to: (608) 264-0403. Indicate in the transmittal envelope or cover sheet that it is the 2021 VSO Grant.

If you have questions regarding the VSO Grant, please call 1-800-WIS-VETS (947-8387) and ask to speak with Chad McCafferty or submit an email to [VetsBenefitsGrants@dva.wisconsin.gov](mailto:VetsBenefitsGrants@dva.wisconsin.gov).

Sincerely,

Donald Placidi Jr.  
Division Administrator

Enclosures

1. Application for Veterans Service Organization Grant (WDVA 0057B)
2. Grant Agreement (WDVA 0057C)
3. Veterans Service Organization Grant – Federal Benefits Report (WDVA 0057D)



Wis. Stats. Chapter 45

APPLICATION FOR VETERANS SERVICE ORGANIZATION GRANT

The information requested on this form is authorized for collection by Ch. 45, Wis. Stats. and VA 7, Wis. Admin. Code. The information collected is used to determine eligibility for programs administered by the department. Completion of this form is voluntary; however, failure to furnish the requested information may result in denial of eligibility for programs. Personally identifiable information collected on this form is not likely to be used for any other purpose.

This department does not discriminate on the basis of race, color, national origin, sex, religion, age, or disability in employment or provision of services.

Pursuant to Wisconsin Statute § 45.41, states, the \_\_\_\_\_ (VSO) hereby applies for a State Veterans Organization Grant for Fiscal Year beginning April 1, \_\_\_\_\_ 2020 \_\_\_\_\_, and ending March 31, \_\_\_\_\_ 2021 \_\_\_\_\_, for the purpose of providing services and representation to former military personnel, their dependents and survivors in relation to claims for any benefits available from the federal government where such claims have risen out of or by reason of service in the United States Armed Forces.

In accordance with Wisconsin Statute, § 45.41, and/or Chapter VA 7, Wisconsin Administrative Code, an application shall provide evidence of eligibility and the following exhibits, which are included with this application:

- 1. A statement of salaries and travel expenses paid to employees working in the VA Regional Office, covering the period, April 1, 2020 to March 31, 2021. The statement shall be certified as correct by a Certified Public Accountant licensed as certified under Wisconsin Statute Chapter 442 and sworn to as correct by the adjutant or principal officer of the State Veterans Organization.
2. A financial statement for your service organization for the previous fiscal year and evidence of claims service.
3. An affidavit by the adjutant or principal officer of your service organization stating that a full-time service office was maintained at the VA Regional Office for the period, April 1, 2020 to March 31, 2021.
4. A completed Annual Report for Federal Benefits using the WDVA VSO Grant-Federal Benefits Report form provided with this letter.

State Service Officer

Commander, Adjutant, or other official designated to sign for the VSO

Please submit with this application the required exhibits referenced above and two signed copies of the Agreement between the Wisconsin Department of Veterans Affairs and your service organization.

**VETERAN SERVICE ORGANIZATION GRANT AGREEMENT  
BETWEEN THE STATE OF WISCONSIN, DEPARTMENT OF VETERANS AFFAIRS  
AND (VETERANS SERVICE ORGANIZATION)**

This Agreement is made and entered into effective as of the 1<sup>st</sup> day of April 2021, between the State of Wisconsin, Department of Veterans Affairs (hereinafter referred to as the “Department”) and the (hereinafter referred to as the “VSO”).

**WHEREAS**, it is the intention of the parties to this Agreement that all work shall be made for their mutual benefit; and

**WHEREAS**, the VSO has a well-trained and competent staff stationed at the Department of Veterans Affairs Regional Office in Milwaukee (hereinafter referred to as the “VARO”) to perform the services referred to in this Agreement;

**NOW THEREFORE**, in consideration of the premises the parties hereto agree as set forth below.

**ARTICLE 1. REVIEW**

Liaison with the Department will be through the Division of Veterans Benefits that will represent the Department’s interest in review of quality, quantity, rate of progress, timeliness of services, and related considerations as outlined in this Agreement.

**ARTICLE 2. AVAILABILITY OF FUNDS**

The appropriation from which grants are to be made is § 20.485(2)(vw), Wis. Stats. The provisions of the program require the Department to make each grant payment to an eligible VSO in an amount equal to 50 percent of all salaries and travel expenses during the previous fiscal year for those employees engaged in veterans’ claim service at the VA Regional Office (VARO) or \$100,000, whichever is less. If the total amount of payments committed to be paid exceeds the amount available for the payments from the appropriation under § 20.485(2)(vw), Wis. Stats., the Department must prorate the funds among the state veterans organizations receiving the payments.

**ARTICLE 3. SERVICES**

The VSO agrees to provide services and representation to former military personnel and their dependents and survivors in relation to claims for any benefits available from the Federal Government where such claims have arisen out of or by reason of service in the U.S. Armed Forces.

**ARTICLE 4. PERIOD OF PERFORMANCE**

The provision of services covered by this Agreement shall be from April 1, 2020 through March 31, 2021.

## ARTICLE 5. ANNUAL REPORT

The VSO agrees to provide the Department with an Annual Service Delivery report on a form prescribed by the Department for the period April 1, 2020 through March 31, 2021. This report shall be submitted to the Department with the grant application materials.

## ARTICLE 6. OTHER REPORTS

The VSO agrees to furnish the Department with any other relevant reports or information pertaining to the provision of services described in this Agreement requested by the Department.

As soon as practicable after March 31, 2021, the VSO shall file an application with the Department for the 12-month period covered by this Agreement. This application shall consist of an affidavit by the VSO's adjutant or principal officer certifying that a full-time service office was maintained in the VARO by the VSO and a statement of salaries and travel expenses paid to employees engaged in veterans' claims service and stationed at the VARO by the VSO. The statement of salaries and travel expenses shall be certified as correct by a Certified Public Accountant. The VSO shall also submit a copy of the financial statement for its last completed fiscal year with the application.

## ARTICLE 7. EXAMINATION OF RECORDS

The VSO agrees that the designated agent of the Department will have access to, the right to examine, audit, transcribe, and copy any pertinent records and computer generated or based information of the VSO relating to the Agreement which are not privileged and confidential under the rules and regulations of the Department and that it will not unreasonably withhold any requested records or information. All records pertaining to this Agreement shall be maintained for a minimum of three (3) years following the termination date of this Agreement. Grant funds shall be maintained in a separate account subject to audit by the Department.

## ARTICLE 8. REDUCTION, SUSPENSION, OR TERMINATION OF GRANT

The Department reserves the right to cancel this Agreement in whole or in part without penalty due to non-appropriation of funds or for failure of the VSO to comply with terms, conditions, and specifications of this Agreement. If the VSO fails to comply with § 45.47, Wis. Stats., the Department may, in addition to any other legal remedy available to the Department, reduce, suspend, or terminate a grant the Department made to the VSO.

## ARTICLE 9. NONDISCRIMINATION/AFFIRMATIVE ACTION

In connection with the performance of work under this Agreement, the VSO agrees not to discriminate against any employee or applicant for employment because of age, race, religion, color, handicap, sex, physical condition, developmental disability as defined in § 5.01(5) Wis. Stats., sexual orientation, or national origin. This provision shall include, but not be limited to, the following: employment, upgrading, demotion or transfer, recruitment advertising, layoff or termination, rates of pay or other forms of compensation, selection for training, including apprenticeship.

ARTICLE 10. APPLICABLE LAW

This Agreement shall be governed under the laws of the State of Wisconsin. The VSO shall at all times comply with and observe all federal and state laws, local laws, ordinances, and regulations which are in effect during the Period of Performance of this Agreement and which in any manner affect the work or its conduct.

ARTICLE 11. ARBITRATION

Disputes relating to this Agreement should be addressed to Scott Sussman, Deputy Legal Counsel, Department of Veterans Affairs, 2135 Rimrock Road, P.O. Box 7843, Madison, Wisconsin 53707-7843. Any disputes arising as to quality or quantity shall be subject to arbitration as provided in Wisconsin Statute Chapter 788. A good faith dispute creates an exemption to prompt payment.

ARTICLE 12. PAYMENT OF GRANT

The Department shall pay the VSO the entire grant consistent with Article 2 above, provided the VSO has abided by all of the terms and conditions of this Agreement including the submission of the reports and information requested by the Department in relation to this Agreement and the submission of the annual application for the grant.

STATE OF WISCONSIN  
DEPARTMENT OF VETERANS AFFAIRS

VETERAN SERVICE ORGANIZATION

\_\_\_\_\_  
James Bond  
Deputy Secretary

BY: \_\_\_\_\_  
VSO Official

Print Name: \_\_\_\_\_

BY: \_\_\_\_\_  
State Service Officer

Print Name: \_\_\_\_\_

## VETERANS SERVICE ORGANIZATION GRANT – FEDERAL BENEFITS REPORT

The information requested on this form is authorized for collection by Ch. 45, Wis. Stats. and VA 7, Wis. Admin. Code. The information collected is used to determine eligibility for programs administered by the department. Completion of this form is voluntary; however, failure to furnish the requested information may result in denial of eligibility for programs. Personally identifiable information collected on this form is not likely to be used for any other purpose.

This department does not discriminate on the basis of race, color, national origin, sex, religion, age, or disability in employment or provision of services.

**REPORT FOR THE FISCAL YEAR** \_\_\_\_\_ **2021** ; **FOR** \_\_\_\_\_ **VSO**

From \_\_\_\_\_ April 1, 2020 \_\_\_\_\_ , to \_\_\_\_\_ March 31, 2021 \_\_\_\_\_

### FEDERAL BENEFITS

	ACTIVITY	NUMBER	COMMENTS
1.	<b>Power of Attorney</b> Indicate the number of new VA Form 21-22s submitted to WDVA/Other VSOs for representation	/	
2.	<b>Disability Compensation</b> Indicate the number of new and re-opened VA Form 21-526s, reconsiderations VA 21-526 or 21-527 or other communications submitted for compensation benefits to WDVA/VA or other VSOs		
3.	<b>Pension</b> Indicate the number of VA Form 21-527s or other communications submitted for veterans Pension benefits to WDVA/VA or other VSO		
4.	<b>Medical Expenses for Pension</b> Indicate the number of VA Form 21p-8416s submitted for Unreimbursed Medical Expenses for pension and death pension to WDVA/VA or other VSOs		
5.	<b>Loan Guaranty</b> Indicate the number of Federal Home Loan applications submitted		
6.	<b>Educational</b> Indicate the number of Federal Educational benefit applications submitted		
7.	<b>Vocational Rehabilitation</b> Indicate the number of Federal VocRehab applications submitted		
8.	<b>Medical</b> Indicate the number of VA Form 1010EZ forms submitted for enrollment into VA Healthcare		
9.	<b>USDVA Notices of Disagreement</b> Indicate the number of Notice of Disagreements, VA Form 21-0958, DRO Request forms submitted to WDVA/VA and other VSOs		
10.	<b>USDVA Waiver Requests</b> Indicate the number of requests for waivers of Federal benefits regulations submitted		
11.	<b>BVA Appeals</b> Indicate the number of VA Form 9s submitted to WDVA/VA and other VSOs		
12.	<b>Insurance</b> Indicate the number of applications for VA Insurance programs submitted		
13.	<b>Burial Allowances</b> Indicate the number of applications for VA Burial Allowance submitted		
14.	<b>Flag Applications</b> Indicate the number of applications submitted for Burial Flags		
15.	<b>Marker Applications</b> Indicate the number of applications submitted for Burial Markers		
16.	<b>DIC</b> Indicate the number of applications for Dependency and Indemnity Compensation, VA Form 21-534, submitted to WDVA/VA and other VSOs		
17.	<b>Survivor's Pension</b> Indicate the number of applications for VA Death Pension, VA Form 21-534, submitted to WDVA/VA and other VSOs		
18.	<b>Discharge Correction</b> Indicate the number of applications for discharge upgrades submitted		
19.	<b>Miscellaneous</b> Indicate the number of applications for other federal benefits, not listed, submitted by your office. Include types in comments		