AIR FORCE AID SOCIETY
EMERGENCY ASSISTANCE REQUIRED DOCUMENTATION

Note: Upload documentation that specifically pertains to your financial assistance need and any other documentation not listed but would help in processing your application.

FALCON ASSIST APPLICATION (up to $1500) – Active Duty, Guard, Reserve, Spouse with Power of Attorney (POA)

Military ID	Front and back	
Leave and Earning Statement (LES)	Military member	
Civilian Pay Statement	Guard/Reserve	
Military Activation Order	Guard/Reserve on active duty	
Power of Attorney	If not the military sponsor	
CATEGORY OF NEED		
Vehicle Repair	- Vehicle Registration - Proof of Insurance	
Dorm Relocation (Involuntary Relocation)	First Sergeant Referral Certificate	
Emergency Travel (Extended Family – grandparent, uncle, aunt, nephew, etc.)	**AF Form 988** "Leave Request/Authorization"	
	Airfare: **AFAS purchase** – Provide departure/arrival airport, departure/return dates, number of tickets (self & dependents) in application statement of need. **Online purchase** – Provide Itinerary w/cost.	
	POV Travel: Document showing mileage to/from home to emergency location	

STANDARD ASSIST APPLICATION

Military ID	Front and back	
Leave and Earning Statement (LES)	Military members	
Civilian Pay Statement (LES)	Guard/Reserve/Retiree/Widow(er) members	
Budget	System attachment	
Military Activation Order	Guard/Reserve on active duty	

Retirement Account Statement (RAS)	If a retiree receiving retirement pay	
VA Disability Letter	If receiving disability income	
Power of Attorney	If not the military sponsor	
CATEGORY OF NEED:		
Funeral Expenses	- Funeral Home Estimate(s) - Deceased Transportation Cost (if req'd from another location) - Burial Site Estimate/Cost (if req'd)	Assist is typically for dependents
Dental	Estimate/Emergency Cost	
Medical	- Co-pay Bill - Medication Bill - Special Equipment Estimate	
Cranial Helmet	- Doctor's Prescription - TRICARE/Other Insurance Denial Letter - Estimate	All documents required
Special Needs (EFMP)	- vMPF Data Sheet (show Q Code – EFMP)* - Estimate/Cost* - Doctor/Therapist Recommendation (confirm equipment/need will help)	*Documents required
Mortgage	Payment Invoice/Past Due Notice	
Rent	- Lease Agreement* - Past Due/Amount Owed Notice - Eviction Notice (if served)	*Page(s) showing renter(s) & monthly payment
Rent – 1st month and/or Security deposit	Approval Notice/Lease Agreement	
Short Notice Medical Retirement/Separation	- Lease Agreement - Utility deposit notice - Relevant documentation for determination	
Housing Allowance (HALO) - OCONUS	-Lodging Invoice/Bill (if request is for lodging assist) - Rental Agreement (if request is for rent/deposit)	
Utilities **(**Phone, Electric, Home Gas, Water)	Invoice/Bill	
Other Basic Living Expenses (Food, gas, etc.)		No documents required
Emergency Travel (Death/Illness of Immediate Family Member: member's spouse and member's or spouse's parents	**AF Form 988** "Leave Request/Authorization" **or AF Form 972** "Request and	No budget required

(including stepparents), children, brothers and sisters)	Authorization for Emergency Leave" **In Loco Parentis (ILP) Affidavit (If member invokes ILP)** - a. A person who stood in place of the member's parent for a period of at least 5 years before the member became 21 years of age or entered military service. b. The person provided a home, food, clothing, medical care, and other necessities, and gave moral, disciplinary guidance, and affection.	SM with AF Form 972 – Airfare is Unit funded
	Airfare: **AFAS purchase** – Provide departure/arrival airport, departure/return dates, number of tickets (self & dependents) in application statement of need. **Online purchase** – Provide Itinerary w/cost.	
	Lodging: Online document showing lodging reservation/# of nights/cost	
	Vehicle Rental: Online document showing # of days and cost	
	POV Travel: Document showing mileage to/from home to emergency location	
Pet PCS Transportation (To/From OCONUS)	- PCS Order - Transportation (only) Estimate/Cost	All documents required Request is submitted within 60 of relocation/PCS
Pet Emergency Surgery/Emergency Illness	- Invoice/Bill - Vet memo stating surgery/treatment was immediate need.	All documents required Request must be submitted within 30 days of service
Emergency Home Repair	Two Repair Estimates	AFAS does not typically assist with this category but can

		apply for exception consideration
Child Care	Bill/Invoice	CDC Care, Off Base Care
Vehicle Expenses (Payment, insurance, registration)	Bill/Invoice	
Vehicle Repair	- Vehicle Registration - Proof of Insurance - Two Repair Estimates	All documents required
Vehicle Initial Registration/Tags/Titles/Taxes	- Dept. of Motor Vehicle invoice - Proof of insurance	Only in states where not included in purchase contract and SM unaware