

ARMY EMERGENCY RELIEF - PRE-DISASTER (EVACUATION/STABILIZATION IN PLACE)

For use of this form, see AR 930-4, AERO Section Reference Manual, or www.AERHQ.ORG

I am applying for financial assistance for evacuation or stabilization in place (when evacuation is not geographically possible) due to:

Name of event: _____ County of Residence*: _____ Date: _____ Amount: \$ _____

*County must be identified by the Federal Government for mandatory evacuation to qualify for evacuation funds. Bring proof of residency.

SERVICE MEMBER'S INFORMATION

1. Name (Last, First MI)		2. DOB	3. DOD ID# or SSN
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4. Rank	5. Branch USA USMC USN USAF USCG	6. Component ACTIVE NATIONAL GUARD RESERVES
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7. Duty Status (For Survivors enter the Duty Status at the time of the Service Member's passing and provide date deceased)

ACTIVE	ETS Date			TITLE 32 (Requires Director, AER approval)
AGR	REFRAD Date			TPU (Requires Director, AER approval)
TITLE 10	Start Date	End Date	# of Days	GREY AREA RETIRED (Requires Director, AER approval)
RETIRED	Retirement Date			OTHER: _____ (Requires Director, AER approval)

9a. UNIT (Retired leave blank)	9b. INSTALLATION	9c. UIC
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10. Applicant if other than Service Member

10a. Name (Last, First, MI)	10b. DOB	10c. DOD ID# or SSN
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10d. Applicant Relationship to Sponsor SPOUSE CHILD PARENT WARD OTHER _____	10e. Special Power of Attorney (SPOA) YES (INCLUDE COPY) NO
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11. ADDRESS

11a. House Number and Street	Apt #
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11b. City	11c. State	11d. Zip Code	11e. Country (if outside US)
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12. Phone	13. Email Address
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14. Number of Dependents: _____

15. Are you currently in bankruptcy or do you plan to file for bankruptcy within the next 6 months?	NO	YES under Chapter 7 13
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FAILURE TO REVEAL CURRENT BANKRUPTCY OR INTENT TO FILE CONSTITUTES FRAUD AND MAY RESULT IN PERMANENT RESTRICTION FROM FUTURE AER ASSISTANCE.

16. Financial Institution Information (only complete if funds are to be electronically transferred):

NAME OF INSTITUTION: _____	TYPE OF ACCOUNT: CHECKING SAVINGS
ROUTING NUMBER (9 Digits): _____	ACCOUNT NUMBER: _____
NAME ON THE ACCOUNT: _____	