

**Los Angeles Police Relief Association  
Los Angeles Police Relief and Assistance Foundation**

**Grant & Emergency Relief Application**

**Recipient Information** - Provide the following information for whom the assistance is being requested.

Name	Serial Number
Phone Number	Email Address
<b>Recipient Description</b>	<b>Employment Status of Active/Retired Officer</b>

**Amount Requested**

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**LAPRAF Grants & Emergency Relief Received in the Past**

Date	Amount
Date	Amount

**Other Fund Raising Efforts** - Ex. Blue Ribbon Trust, GoFundMe, Station events

Source	Source
Date	Date
Amount	Amount

**Reason For Request** - Please provide a detailed description of the need for the requested assistance on page 2.

**Requestor Information** - Skip this section if you are also the recipient.

Name	Relationship to Recipient
Phone Number	Email Address

**Requestor or Recipient Signature**

Signature	Date
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**Reason For Request** - *Provide a detailed description of the need for the requested assistance.*

Please provide documentation for the information below such as a paycheck stub, bank account statements, utility bills, mortgage/rental statements, etc.

Income		Monthly
LAPD Gross Pay		
Pension Gross Pay		
Other Employment Gross Pay		
Spouse/Domestic Partner Gross Pay		
Rental Properties		
Investments		
Government VA (school)		
Workers' Compensation Pay		
Other Income		
<b>Total Income</b>		
Bank Accounts		Balance
Investment Accounts		Balance
Expenses		Monthly
Rent / Mortgage		
Property Taxes		
Food		
Utilities		
Phone		
Cable / Internet		
Vehicle Payment		
Vehicle Maintenance (gas, repairs, inc.)		
Car Insurance		
Child Support		
Alimony		
Other Expenses		
<b>Total Expenses</b>		
Credit Cards / Misc. Loans	Balance	Monthly
<b>Total Credit Cards / Misc. Loans</b>		

Office Use Only. To be completed by the Executive Director

Application Tracking	
Date application was received	
Date application sent to LAPRAF Committee & ER Liaison	
Fiancial Documentation Provided	<div>Yes</div> <div>No</div>

LAPRAF Committee & ER Liaison Recommendation		
Type	Amount	Timing
LAPRAF Grant Approved		<div>Board Meeting Approval</div> <div>Urgent Need</div>
LAPRA Emergency Relief		<div>Board Meeting Approval</div> <div>Urgent Need</div>
Additional Comments <div></div>		