

**STATE EMPLOYEES' ASSOCIATION OF NH**  
**SEIU LOCAL 1984**  
**Benevolence Fund Guidelines**

**Benevolence Fund Purpose**

The State Employees' Association of NH, SEIU Local 1984 seeks to be a source of support to all our union brother and sisters.

The fund is to enable SEA, SEIU Local 1984 to provide financial aid to individuals who are in need on an urgent basis. The fund may not be applicable to all the urgent cases, especially for those who have other financial options. The SEA, SEIU Local 1984 has the right to disapprove the request and may consider providing help other than monetary support. The fund will assist with the necessities of life.

These guidelines are not meant to discourage you, but to allow SEA, SEIU Local 1984 to be better equipped to evaluate your current situation and determine how we can best help you. All information is maintained in a discreet, confidential, and private manner.

**Application Process**

All applicants are required to complete the prescribed form in its entirety and provide supporting documents where needed (i.e. invoices, bills, etc.).

The Benevolence Committee shall award funds after reviewing applications. Return this application to the Business Administrator at SEA, SEIU Local 1984. Please allow five business days for review of your application. You may be contacted via phone, electronic mail, or letter.

**Interview**

Applicants MAY be asked to come in for an interview before a final decision is made. The union reserves the right to ask for documentation to verify eligibility for assistance.

**Processing**

**Checks**

Checks will be made out payable to third party agencies where appropriate.

**Availability of Funds**

All applicants are considered on a first come, first served basis and as funds are available. Even though the SEA, SEIU Local 1984 budgets for the benevolence fund, it is under no obligation to spend these funds in their totality every year, but if these funds are exhausted the SEA, SEIU Local 1984 can not provide any additional funds unless an additional appropriation is made and adopted by the Board of Directors.

**State Employees' Association of NH  
SEIU Local 1984  
Benevolence Fund Application**

PLEASE COMPLETE ENTIRE APPLICATION

Date \_\_\_\_\_

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Home email \_\_\_\_\_

Work Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Deadline: \_\_\_\_\_ Amount Needed \_\_\_\_\_

Please explain in detail the circumstances which brought about this need

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you are requesting a bill payment, please supply the following information

(For more than one bill, please attach the additional information):

Company Name \_\_\_\_\_

Phone \_\_\_\_\_ Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Account Number \_\_\_\_\_ Total Amount Due \_\_\_\_\_

Amount Required \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Street city State Zip \_\_\_\_\_

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**Do Not Write Below This Line**

**For SEA, SEIU Local 1984 Use Only**

Date application received in this office \_\_\_\_\_

Disapproved \_\_\_\_\_ Reason \_\_\_\_\_

Approved \_\_\_\_\_ Approved By \_\_\_\_\_

Check payable to whom? \_\_\_\_\_ Amount \_\_\_\_\_ Check# \_\_\_\_\_

Send to where? \_\_\_\_\_

Address \_\_\_\_\_

Street city State Zip \_\_\_\_\_

Date paid \_\_\_\_\_ Written by \_\_\_\_\_

Attach any additional comments