



Transportation Network Vehicle Grant Application Process



KEEPING OUR PROMISE TO
AMERICA'S VETERANS



Importance of Reporting

Reminder that reporting is based on a VA fiscal year.



These are hours volunteered from October 1 to September 30 of the following year.



HSC Monthly Reporting Form 40

<u>Membership</u>				<u>Address</u>						<u>Date Of</u>						
<u>Number (If</u>	<u>First Name</u>	<u>Middle Name</u>	<u>Last Name</u>	<u>Line 1</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	<u>Email</u>	<u>Phone</u>	<u>Birth</u>	<u>Location</u>	<u>Date Volunteered</u>	<u>Job Description</u>	<u>Hours</u>	<u>Miles</u>	<u>Vets Transported</u>

If you have any questions or concerns on how to fill out the forms you can always email us at VAVS@dav.org.



DAV Transportation Network Monthly Reporting Form 40

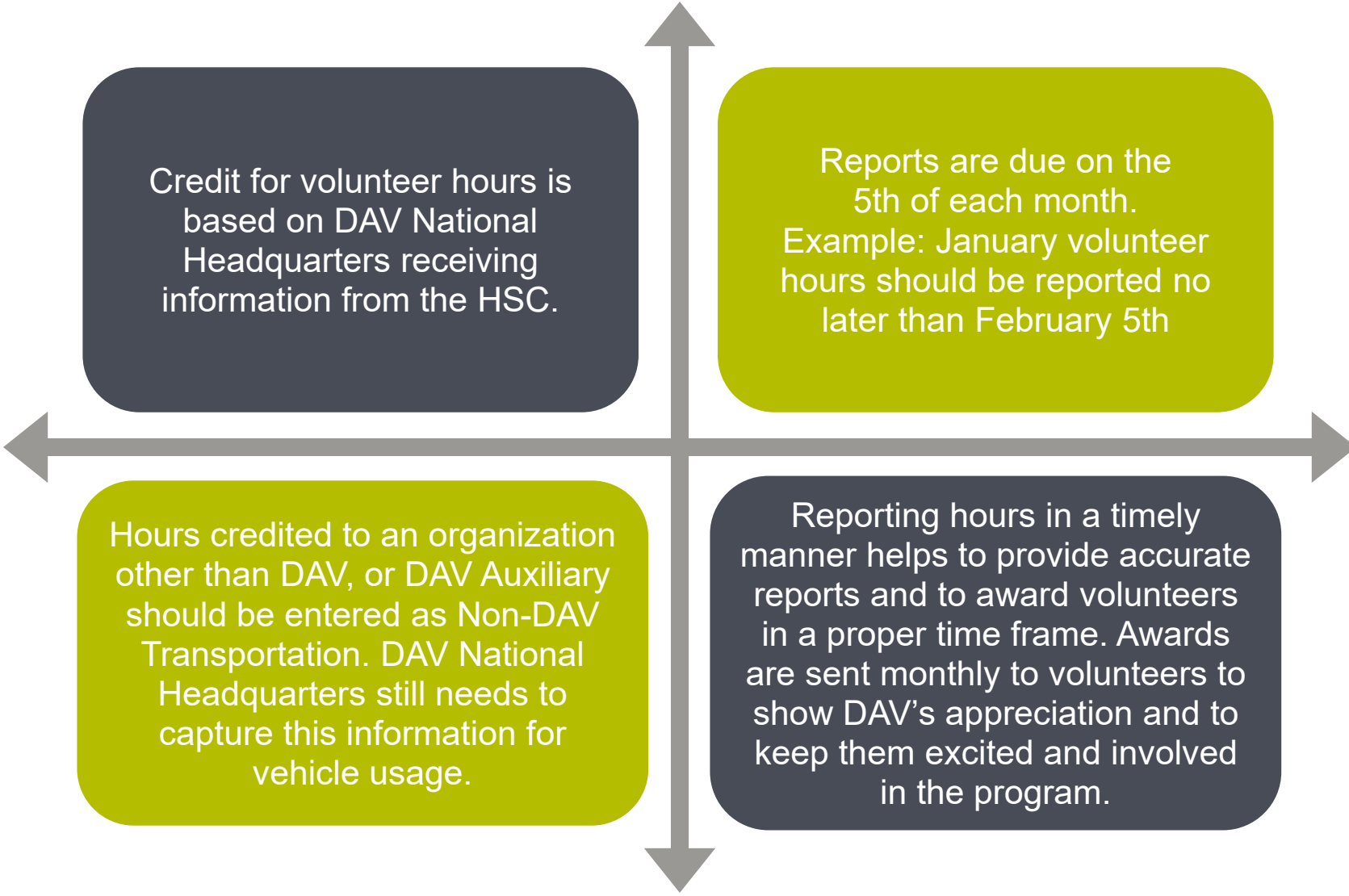
We encourage you to **PLEASE** use this excel form, you can find the Reporting Form 40 at this link.

<https://www.dav.org/member-resources/voluntary-services/>

- Name
- Address
- Date volunteered
- Job Description
- Hours
- Miles
- # of veterans transported



Tips for Reporting Hours

A diagram consisting of a 2x2 grid of rounded rectangular boxes. A horizontal line with arrows at both ends and a vertical line with arrows at both ends intersect at the center, dividing the grid. The top-left box is dark gray with white text. The top-right box is green with white text. The bottom-left box is green with white text. The bottom-right box is dark gray with white text.

Credit for volunteer hours is based on DAV National Headquarters receiving information from the HSC.

Reports are due on the 5th of each month.
Example: January volunteer hours should be reported no later than February 5th

Hours credited to an organization other than DAV, or DAV Auxiliary should be entered as Non-DAV Transportation. DAV National Headquarters still needs to capture this information for vehicle usage.

Reporting hours in a timely manner helps to provide accurate reports and to award volunteers in a proper time frame. Awards are sent monthly to volunteers to show DAV's appreciation and to keep them excited and involved in the program.



Volunteer Award Incentive Milestones

Incentive Award Level	Miles	Hours
1	1	1
2	2,500	50
3	5,000	100
4	7,500	150
5	10,000	200
6	15,000	250
7	25,000	500
8	35,000	750
9	50,000	1,000
10	75,000	2,000
11	100,000	3,000
12	150,000	5,000
13	175,000	7,500
14	200,000	10,000
15	225,000	15,000
16	300,000	20,000
17	325,000	25,000
18	350,000	30,000
19	400,000	35,000
20	500,000	40,000



Importance of Hospital Service Coordinators

DAV Hospital Service Coordinators play an important part in our efforts to assist ill and injured veterans. They are the front line for the DAV Transportation Network, by scheduling rides, keeping vehicles running safely and reporting volunteer activities to DAV National Headquarters.



- Coordinate the program with appropriate services.
- Receive the transportation request and determine the transportation eligibility of veterans.
- Supervise all the volunteer transportation drivers.
- Contact the volunteer transportation driver and make the assignment.



Prepare and distribute all reports to Department and National DAV Headquarters. NHQ contact Voluntary Services 859-441-7300, ext. 1313, email reports to VAVS@dav.org

- The DAV Hospital Service Coordinator position was established to assume the responsibility for coordinating the Transportation Network.
- The veteran will be able to sign up for a ride via phone or by going into the transportation office.
- Have veterans schedule appointments between a designated time. This keeps the drivers on a good schedule.





Transportation Network

2025 Transportation Network Stats

Over **614,000** hours spent by DAV volunteer drivers producing more than **9.6 million** logged miles, totalling over **230,000** no-cost rides for ill and injured veterans to and from VA medical facilities.



Since 1987, DAV has donated **3,909** vehicles at a cost of more than **\$97 million**.

Also, volunteer drivers have traveled more than **770 million** miles providing over **20.4 million** rides.

REQUESTING VEHICLES THROUGH THE COLUMBIA TRUST GRANT PROGRAM

Last Quarter of the Year

- The Columbia Trust Grant Memo is emailed out to the Officers to Receive Mail (ORM) for each Department or Chapter.
 - Chapters without ORM emails will need to contact their Department Adjutant. This years memo will include guidance for the online application.



National Headquarters
860 Dolwick Drive
Erlanger, KY 41018
tel 859-441-7300
toll free 877-426-2838
dav.org

Washington Headquarters
1300 I Street NW, Suite 400W
Washington, DC 20005
tel 202-554-3501

TO: Department and Chapter Commanders and Adjutants
Hospital Service Coordinators

FROM: Barry Jesinoski, National Adjutant

DATE: October 2, 2025

SUBJECT: 2026 DAV Transportation Network & Columbia Trust Vehicle Application

Thank you for your service to our nation's veterans! We are pleased to announce the availability of vehicles in conjunction with the DAV Transportation Network. Attached is the DAV Transportation Network Vehicle Information Summary, which includes a description, total cost and minimum shared expense requirements. The vehicles available for 2026 are listed below:

- Ford Explorer RWD 7-Passenger
- Ford Explorer 4WD 7-Passenger
- Ford Transit Wagon Van (T-350) RWD 12-Passenger
- Ford Transit Wagon Van (T-350) AWD 12-Passenger

The value of this program and the impact it can have on veterans' lives is amazing. However, we must be very thoughtful in how we determine the best use of these resources when it comes to placing vehicles. As such, there are some very important factors that interested applicants must consider:

1. Do you have a current availability of drivers to operate a new, replacement or additional vehicle?
2. Have you verified with complete confidence that your VA Medical Center director will accept a donated vehicle?
3. As you review this document, please note that minimum shared expenses are determined annually based upon fleet pricing received from Ford Motor Co.
4. Departments and chapters are encouraged whenever possible to pay the full cost of the vehicle(s). However, when sufficient financial resources are not available, the National Service Foundation's Columbia Trust may assist with a grant. Accordingly, it is required that any entity applying for a grant must have submitted its current Annual Financial Report.



Grant Process for New Vehicles

DAV Transportation Network & Columbia Trust Grant Application

https://dav.smartsimple.com/s_Login.jsp

Welcome to the DAV Charitable Service and DAV National Service Foundation Grant Application Site

To access the online grant system as a first time user, DAV department leaders (adjutants and commanders) must select “Request Password” to receive credentials and enter the email address used for your membership record.

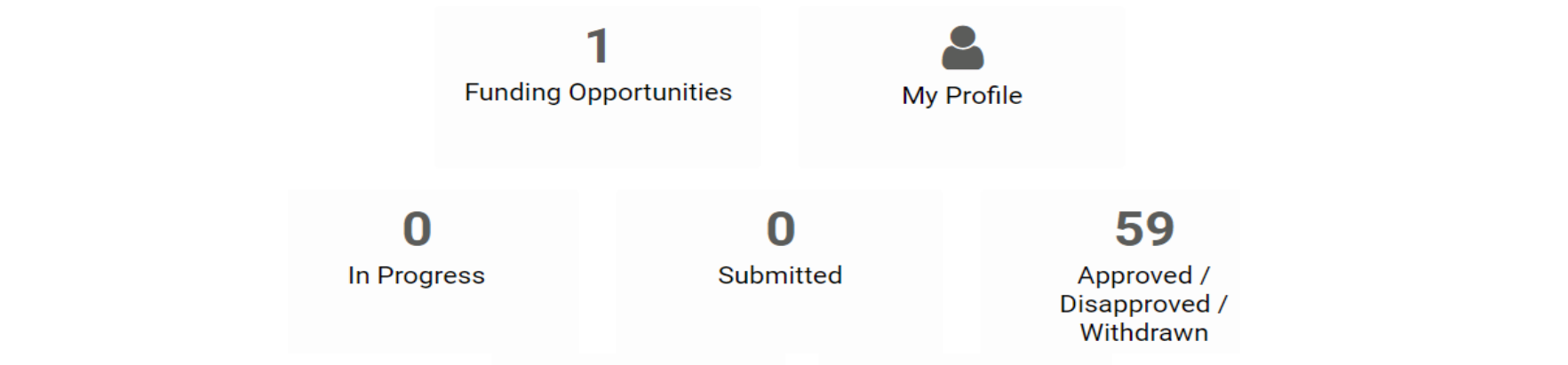
First time DAV department or chapter user? Request Password	First time US Tax-Exempt org user? Register Here
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For additional assistance, please contact us via phone at (877) 426-2838, ext. 3313 or ext. 3309 or email the following:

U.S. Tax Exempt Organizations - cst@dav.org

DAV Department or Chapter - nsf@dav.org

Once you login, select Funding Opportunities. *If you begin working on an application and are not ready to submit at that time, the next time you login, select In Progress to pick up where you left off.



The Eligibility and Guidelines button provides the type of vehicles being offered, total cost and minimum share amounts included in the memo distributed by Voluntary Services. To begin the process, select Apply Now.

Funding Opportunities

			1-1 of 1
Opportunity Details			Deadline
National Service Foundation's Columbia Trust Transportation Network Vehicle Grant		12/30/2021	Eligibility and Guidelines Apply Now



Grant Process for New Vehicles

One eligibility question must be answered before gaining access to the application.

New Grant

ELIGIBILITY

* Previous year's annual financial report(s) (AFR) must be approved by DAV National Headquarters in accordance with Articles 8 and 9 of the National Bylaws or must be attached if not required to file under provisions of the National Bylaws.

☐ Please confirm you have read and understand the requirement above.

✓ Submit

After confirming the AFR acknowledgement, navigate to the Contact Information page. Provide the following information:

* Are you authorized to exchange information regarding this grant request?

☒ Yes

☐ No

* The vehicle(s) requested will be donated to the VA Medical Center(s) chosen to be used in the DAV Transportation Network. The VAMC Director(s) agree to accept the vehicle(s)

☒ Yes

☐ No

Is the department and/or chapter(s) requesting financial assistance from Columbia Trust?

☒ Yes

☐ No

* AFR Attachment

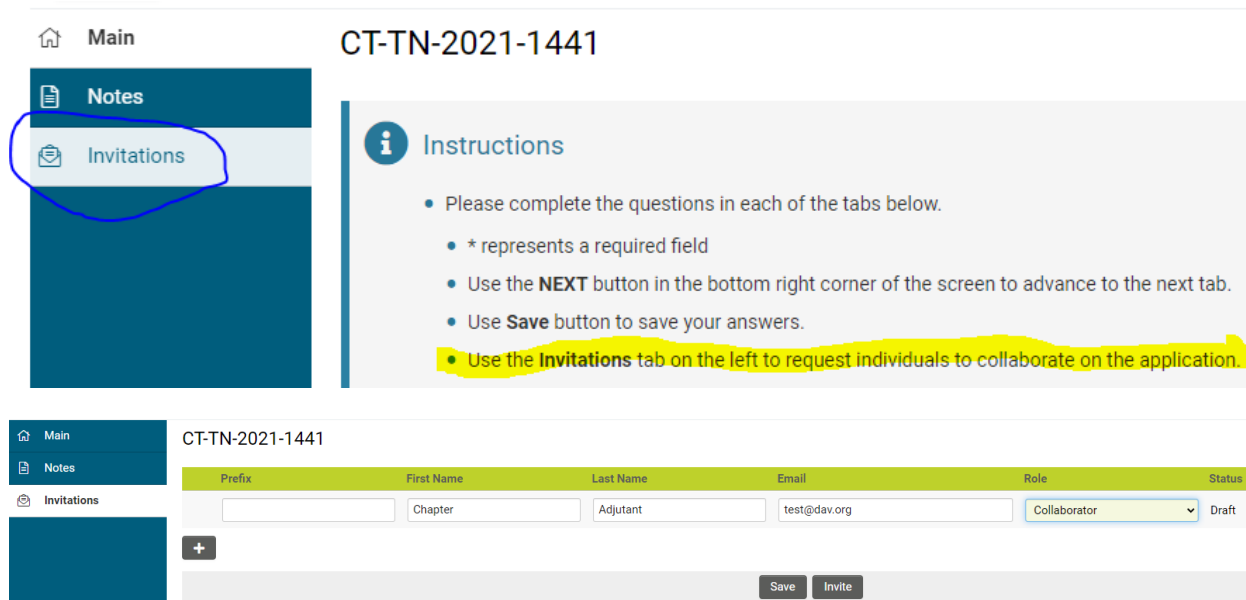
If a department is applying on behalf of its chapter(s), both AFRs are required.



* AFR Attachment must contain at least 1 file

Grant Process for New Vehicles

Department leaders are required to apply on behalf of its chapter(s) but have the ability to request collaborators, specifically chapter leaders, to assist through the Invitations tab within the application.



The screenshot shows the application interface for vehicle grants. The top navigation bar includes 'Main', 'Notes', and 'Invitations' (highlighted with a blue circle). The main content area displays the 'CT-TN-2021-1441' grant details and an 'Instructions' section. The instructions list several steps, with the final step highlighted in yellow: 'Use the **Invitations** tab on the left to request individuals to collaborate on the application.'

Below the instructions, the 'Invitations' tab is active, showing a form to add collaborators. The form includes fields for Prefix, First Name, Last Name, Email, Role, and Status. A '+' button is used to add new collaborators. The 'Save' and 'Invite' buttons are at the bottom right.

Prefix	First Name	Last Name	Email	Role	Status
	Chapter	Adjutant	test@dav.org	Collaborator	Draft

Populate the information for who you want to allow access to work on the application. There is an unlimited amount of collaborators you can invite, simply select the + button. Additionally, multiple collaborators can work on the same vehicle request, if needed.

Collaborators will receive an email with the link to register and login to access the application but will be unable to submit it. This process allows department leaders to control who can access the application while also not being responsible for filling out the vehicle requests for the chapter(s).



Grant Process for New Vehicles

From: DoNotReplyNSF@davgrant.org

To: ronLoporto@charter.net

Subject: Collaborate on DAV National Service Foundation Columbia Trust Grant: CT-TN-2023-2307

Dear Ronald Loporto,

Your assistance is requested to collaborate on a DAV National Service Foundation Columbia Trust Grant: CT-TN-2024-5555 on behalf of Department of Wyoming. Once all changes have been completed please notify the primary contact.

Please click on the link below to accept or decline the invitation.

[Invitation Link](#)

Respectfully,

Floyd Watson



Begin selecting the vehicle requests.

CONTACT INFORMATION

PROJECT INFORMATION

Vehicle Request

Select the plus sign to add each vehicle request.



Separate entries must be completed based on the vehicle type and VAMC location.

* Vehicle

* Quantity of Vehicle

* VA Facility

- The Vehicle dropdown contains the list of all the vehicles available with the total cost and minimum share amounts.
- Enter the number of vehicles you are requesting.
- To select the VA Facility, you may begin typing the exact name of the facility or scroll until you find it.
- If the vehicle(s) will not be parked at the VAMC, provide the location.



Grant Process for New Vehicles

*** VA Facility**

Sheridan VA Medical Center ▼

*** Will this vehicle be parked at the VAMC?**

☐ Yes ☒ No

*** City, State of location this vehicle will be parked**

Sheridan, WY

Additional information regarding the location of the vehicle(s):

Name of location, address, any relevant information

Any communication you want VS to be made aware goes here.

Please **SAVE** before continuing.

Save

Hit Save before continuing.
Upon saving, the following appears.



Fill out the proposed share amount & click Request button to request the selected vehicle(s) for the selected VAMC.

*** Department**

Department of Wyoming

*** Are you applying on behalf of a chapter?**

☐ Yes ☐ No

If the chapter is applying, select the chapter in the dropdown field. *Chapter records appear as they do in membership. Only the chapters associated with the department will be an option in this dropdown.



Grant Process for New Vehicles

* Department

Department of Wyoming 

* Are you applying on behalf of a chapter?

☒ Yes ☐ No

* On Behalf of Chapter

Department of Wyoming - Harrison-haley-heckman ()

Select Enter Share Amount to provide the information.

Proposed Share Amount

Enter Share Amount

A reminder of the vehicle(s) you selected and cost are displayed.

Proposed Share Amount

-  • Indicate the following amounts that are being contributed toward the purchase of the vehicle(s). These amounts should be the MAXIMUM that each source can contribute based upon financial availability.
 - When filling out the Proposed Share Amount(s) see MINIMUM Share referenced in the Vehicle Description.
- Vehicle Selected: Ford Explorer 4WD 7-Pass (Vehicle Cost: \$40,762.00 Min Share: \$22,419.00)**
- Vehicle Quantity Requested: 1**



Grant Process for New Vehicles

Fill out the share amounts accordingly by selecting the + button.

Department Share Source

Department Name	Contribution
Department Total Proposed Share Amount:	\$0.00



Chapter Share Source

 To minimize the Chapter list type the entire State name in the Chapter Name field.

Chapter Name	Contribution
Chapter Total Proposed Share Amount:	\$0.00



Other Share Source

Other Source Name	Contribution
Other Total Proposed Share Amount:	\$0.00





Grant Process for New Vehicles

Department Share Source

Department Name	Contribution
Department of Wyoming	\$20,000.00
Department Total Proposed Share Amount:	
\$20,000.00	

Chapter Share Source



To minimize the Chapter list type the entire State name in the Chapter Name field.

Chapter Name	Contribution
Department of Wyoming - Harrison-haley-heck	\$1,419.00
Chapter Total Proposed Share Amount:	
\$1,419.00	

Other Share Source

Other Source Name	Contribution
Schneider Family Foundation	\$1,000.00
Other Total Proposed Share Amount:	
\$1,000.00	



Grant Process for New Vehicles

As you enter a contribution amount, the total calculates below.

Proposed Share Amount

Total Contribution	
Proposed Total Share Amount:	\$22,419.00

Propose Grant Requested

Grant Requested	
Proposed Total Grant Amount:	\$18,343.00

Save

Close

Select Save then Close.

The share amounts and sources will then appear in the Vehicle Request form. Select Request to enter in the information.

Department Name	Contribution
Department of Wyoming	\$20,000.00
Department Total Proposed Share Amount:	\$20,000.00
Chapter Name	Contribution
Department of Wyoming - Harrison-haley-heckman Chapter #9	\$1,419.00
Chapter Total Proposed Share Amount:	\$1,419.00
Other Source Name	Contribution
Schneider Family Foundation	\$1,000.00
Other Total Proposed Share Amount:	\$1,000.00
Total Contribution	
Proposed Total Share Amount:	\$22,419.00
Grant Requested	
Proposed Total Grant Amount:	\$18,343.00

Save

Request

Close

An alert appears – answer Yes (assuming what you entered was correct)

 Alert

Are you sure you would like to request these vehicle(s)?

YES

NO



Grant Process for New Vehicles

Once you select Request and Yes, select Close to exit the form. *Only select Make Changes if you have revisions.

Department Name	Contribution
Department of Wyoming	\$20,000.00
Department Total Proposed Share Amount:	\$20,000.00
Chapter Name	Contribution
Department of Wyoming - Harrison-haley-heckman Chapter #9	\$1,419.00
Chapter Total Proposed Share Amount:	\$1,419.00
Other Source Name	Contribution
Schneider Family Foundation	\$1,000.00
Other Total Proposed Share Amount:	\$1,000.00
Total Contribution	
Proposed Total Share Amount:	\$22,419.00
Grant Requested	
Proposed Total Grant Amount:	\$18,343.00

Make Changes

Close



Grant Process for New Vehicles

The main application page now includes the basic vehicle information requested.

Vehicle Request

Select the plus sign to add each vehicle request.

+

1-1 of 1 < >

Department	Chapter	Vehicle	Quantity	VA Medical Center	Total Share Amount	Total Grant Request	Total Vehicle Cost	Status	
Department of Wyoming	Harrison-haley-heckman Chapter #9	Ford Explorer 4WD 7-Pass	1	Sheridan VA Medical Center	\$23,345.00	\$19,101.00	\$42,446.00	Requested	Open
			1		\$23,345.00	\$19,101.00	\$42,446.00		

Continue selecting + as needed for additional requests from chapters or on behalf of the department.

Vehicle Request

Select the plus sign to add each vehicle request.

+

1-4 of 4 < >

Department	Chapter	Vehicle	Quantity	VA Medical Center	Total Share Amount	Total Grant Request	Total Vehicle Cost	Status	
Department of Wyoming	Harrison-haley-heckman Chapter #9	Ford Explorer 4WD 7-Pass	1	Sheridan VA Medical Center	\$22,419.00	\$18,343.00	\$40,762.00	Requested	Open
Department of Wyoming	Guthrie Beck Chapter #2	Ford Explorer 2WD 7-Pass	2	Sheridan VA Medical Center	\$42,700.00	\$34,840.00	\$77,540.00	Requested	Open
Department of Wyoming		Ford Transit 350 2WD 12-Pass	1	Sheridan VA Medical Center	\$34,143.00	\$27,935.00	\$62,078.00	Requested	Open
Department of Wyoming		Ford Transit 350 2WD 12-Pass	1	Cheyenne VA Medical Center	\$62,078.00	\$0.00	\$62,078.00	Requested	Open
			5		\$161,340.00	\$81,118.00	\$242,458.00		

Once all requests have been made, answer the question:

*** Do you confirm the funds will be available for the requested vehicles?**

☒ Yes

☐ No

If No is selected, the following message appears:

*** Do you confirm the funds will be available for the requested vehicles?**

☐ Yes

☒ No



If you are unable to have the funds available by the due date, you may forfeit your grant and not receive the vehicle.

Select the NEXT button to navigate to the Application Certification.

CONTACT INFORMATION

PROJECT INFORMATION

APPLICATION CERTIFICATION

Certification Form

To complete the application process and submit your vehicle request, you are required to review and sign a statement of certification.

Instructions:

1. Download the Certification Form by clicking the [link](#) and following your browser's instructions to open or save the file for view on your desktop.
2. Print the Certification Form to allow for review and signature from an authorized representative of the applicant organization.
3. Scan the signed Certification Form and use the below attach feature to submit the form electronically.
4. Each individual chapter requesting a vehicle through its respective department must complete and upload its own Certification Form with the proper signatures.
 - Each Application Certification form must be saved using a different naming convention.

* Upload Certification Form



Follow the instructions as outlined above. The Certification Form can be downloaded and mailed/emailed to the appropriate parties for signature as would be the process with the paper application. Multiple Certification Forms can be uploaded to make it easier to receive department and chapter leaders' signatures, however, each Application Certification form must be saved using a different naming convention. Additionally, multiple vehicle requests can and will be requested within this one application all under the department's record. Please do not submit the application until all vehicle requests on behalf of the department and associated chapters have been requested.

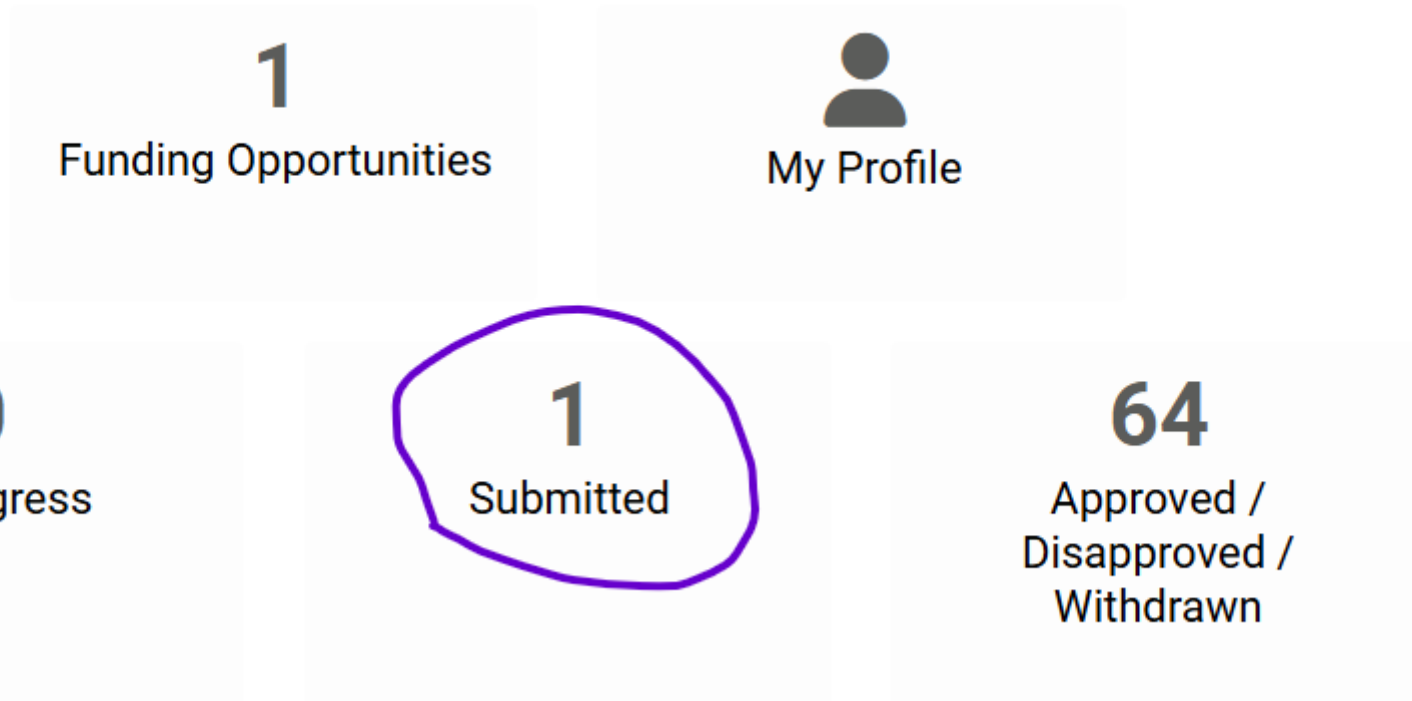
Once the application is complete, select Submit.



The Primary Contact will receive an email confirming the submission along with an attachment of the application. Please note, the Application Summary/Preview contain the information as requested and does not represent the final share amount(s). To reference the final share amount(s), including the amount to be paid by specific funding source(s), you must review the award notification letter distributed by Voluntary Services.



The application can be accessed on a read only basis by navigating to the Submitted field on the home page.



Historical applications can be viewed in the Approved / Disapproved / Withdrawn field.

November - Application Deadline

- ☐ All Applications are required to be received at National Headquarters by the deadline listed in the Memo.
- ☐ Checks should *not* be sent with the application – you will be notified when to send payment. Any checks received with applications will be returned.



December/January

- ☐ Applications are reviewed and final approvals are made.



Mid-February

- ☐ Grant approval letters are emailed to all Departments who have been approved to purchase vehicles. Chapters listed on the applications will also receive the grant approval letter email.

Date _____

Adjutant
Department of (State)
Address
City, State Zip
Employer ID#; EIN

Dear Adjutant Last Name:

I am pleased to advise that the Department and/or its Chapters' application(s) for the following 2020 Ford vehicle(s) has been approved. Please see the following summary for vehicle type, vehicle share and assignment for use in the DAV Transportation Network.

Vehicle Type	Cost to Department/Chapter	Stationed at VAMC (Optional)
Ford Transit 12 passenger	\$20,521.00 (Chapt 98)	Birmingham VAMC, (Oxford, AL)

All expenses related to pick up and delivery of the vehicles are the responsibility of the local VAMC. We will request that the VA Central Office provide instructions to the VAMC Director regarding pickup of the vehicle.

Grants for the 2020 Vehicle Grant Program are administered by the DAV National Service Foundation through its Columbia Trust and are based upon financial need. Grant monies, if applicable, will be transferred from The Columbia Trust to the DAV General Fund for full payment of the approved vehicles.

- ☐ Payment should now be sent

 John Smith 555 Your St. Your Town 54321		DATE _____
PAY TO _____		_____
MEMO _____		
1234 5678 9876 543210		_____

- ☐ Vehicles are ordered



Late Spring through Summer

- Vehicles arrive at DAV National Headquarters.
 - Departments are emailed information on scheduling pickups.
 - VAMCs, HSCs and Chapters are copied on an email.
-
- ❑ VAMCs are responsible for the pickup and delivery of all vehicles.
 - Vehicles will not be released without prior authorization from the receiving VAMC

DATE

Robert Guldner, Adjutant
Department of New Hampshire
PO Box 5184
Manchester, NH 03108

Employer ID#: 26018967

Dear Adjutant Guldner,

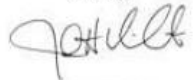
This letter is in reference to your Department's approved request for a 12-passenger vehicle. The vehicle is now available. This vehicle will be donated to the Manchester VA Medical Center (VAMC) for use in the DAV Transportation Network.

It will be the joint responsibility of the Department and the VA medical center to arrange for pick-up and delivery of the vehicle from DAV National Headquarters in Cold Spring, Kentucky. All expenses incurred relating to pick-up and delivery of the vehicle are the responsibility of the VA medical center.

Please contact your DAV Hospital Service Coordinator and VA Voluntary Service Program Manager to coordinate pick-up and delivery. It is also requested that you provide Ms. Connie Kinney, DAV Voluntary Services Correspondent, with the names, addresses, telephone numbers, flight information, and date of arrival of the volunteers who will drive the vehicle. Please provide this information to Ms. Kinney at least five days in advance of a pick-up. Ms. Kinney can be reached at (877) 426-2838 ext. 3231 or ckinney@dav.org. Volunteers must be authorized by the VA Voluntary Service Program Manager to pick-up the vehicle.

Thank you for your participation in this vital program. Should you have any additional questions or concerns, please do not hesitate to contact me or Ms. Kinney.

Sincerely,



John Kleindienst
National Voluntary Services Director

JK:cjk
c: Hospital Service Coordinator Pressler
VAVS Program Manager Krinsky

- Return of vehicles agreement should be completed each year vehicles are donated.
 - Per VHA Directive 1620(2). Even without an agreement a VAMC Director may return a donated van to the donor when the conditions of the vehicle is unacceptable for use or it is no longer needed for use. Copy and paste the link below to access the VHA Directive.
 - https://www.va.gov/vhapublications/publications.cfm?pub=1&order=asc&orderby=pub_Number

1620(2)	VA Center for Development & Civic Engagement Program, 15 - AUSH for Operations	06/16/2022	06/30/2027	VHA Directive 1620; VHA Handbooks 1620.01, 1620.02, 1620.03; Manual M-6, Part II, Chapter 17
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Returning Vehicles From VAMC to DAV

- Per VHA Directive 1620(2) pg. 17 section 9e

e. Donations of vehicles for use in the Volunteer Transportation Network (VTN) may be accepted when a justification of needs exists and a signed written agreement is established between the Disabled American Veterans (DAV) or other donor that sets forth the conditions on VA's use and possible return of the vehicle.

- Vehicles *can only* be returned to a DAV Department or Chapter
- The DAV Department or Chapter will provide the VAMC with a letter requesting/accepting the return of the vehicle
- The VAMC will provide to the DAV Department or Chapter a form SF-97 "Standard Certificate of Obtain Title"
- The recipient of the SF-97 will take the form to the DMV/BMV to request a new title
- The Department or Chapter can keep/sell/donate the vehicle
 - Graphics should be removed prior to a vehicle being sold or donated

VEHICLE GRAPHICS

- Advertising Vehicles contact Candice Rink at 513-588-5781 or email CRink@advertisingvehicles.com

VEHICLE RECALLS

- Manufacturer vehicle recalls are sent to DAV National Headquarters.

VEHICLE ACCIDENTS - Per VHA Directive 1620(2)

- Accidents should be immediately reported to the HSC and/or CDCE Chief or Program Manager.



Voluntary Services:

Email: vavs@dav.org

Mail: Voluntary Services
860 Dolwick Drive
Erlanger, KY 41018

Phone: 859-441-7300 ext. 1313
877-426-2838 ext. 1313

Advertising Vehicles:

Contact: Candice Rink

Phone: 513-588-5781

Email: CRink@advertisingvehicles.com

Trust & Foundation

Phone: 859-441-7300 Ext 3301

Email: nsf@dav.org

