FAX

To:
Company:
Fax:
Phone:

From: BENEVETS (DVS)

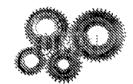
Fax: Phone: E-mail:

NOTES:

USE THIS COVER SHEET TO FAX CLAIMS TO THE VA'S CLAIMS AND EVIDENCE INTAKE CENTERS



(Eastern and Southern Areas)



VBA's Office of Business Process Integration

Fax Coversheet and Checklist

To: VBA (Claims and Evidence Intake Center
Fax:	844-531-7818

Veterans Claims Intake Program

☐ Veteran First and Last Nam	
☐ Veteran C File #	
Claimant Zip Code	
☐ Fax Date: <u>05/20/2016</u>	
# of Pages to include Coversheet: 5	
Forms Included:	

DOUBLE CHECK: Check Confirmation sheet and ensure fax is to

Disclaimer: Incorrect input of fax number, such as dialing the prefix "9" unnecessarily will result in failed submission to VA. Due to similarities in numbers, multiple parties have submitted to the wrong VA department. AVP Metro Petroleum is destroying any faxed Veterans records.

VA Directive 6609, NOVEMBER 9, 2007: NOTICE! Access to Veterans records is limited to Authorized Personnel Only. Information may not be disclosed unless permitted pursuant to 38 CFR 1.500-1.599. The Privacy Act contains provisions for criminal penalties for knowingly and willingly disclosing information from the file unless properly authorized to do so.

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Department of Veterans Affairs

STATEMENT IN SUPPORT OF CLAIM

PRIVACY ACT INFORMATION: The VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, Intigation in which the United States is a party or has an interest, the administration of VA Programs and delivery of VA benefits, verification of identity and status, and personnel administration) as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records - VA, published in the Federal Register. Your obligation to respond is required to obtain or retain benefits. VA uses your SSN to identify your claim file. Froviding your SSN will help ensure that your records are properly associated with your claim file. Giving us your SSN unless the disclosure of the SSN is required by Federal Statute of law in effect prior to January 1, 1975, and still in effect. The requested information is considered relevant and necessary to determine maximum benefits under the law. The responses you submit are considered confidential (38 U.S.C. 5701). Information submitted is subject to verification through computer matching programs with other agencies.

RESPONDENT BURDEN: We need this information to obtain evidence in support of your claim for benefits (38 U.S.C. 501(a) and (b)). Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 15 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB centrol number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at www.reginfo.gov/public/do/PRAMam. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this

located on the CMB Internet Page at www.reginfo.gov/public/do/PRAMain. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about the form.

FIRST NAME - MIDDLE NAME - LAST NAME OF VETERAN (Type or print)

SOCIAL SECURITY NO.

VA FILE NO.

The following statement is made in connection with a claim for benefits in the case of the above-named veteran Reference VA letter dated 4/27/2016 for additional information records to support my pending NOD. Please see the attached 21-4142. I CERTIFY THAT the statements on this form are true and correct to the best of my knowledge and belief.

PENSALT 1. The law provides severe penalties which include time of imprisonment, or obtain, for the without submission of any statement of evidence of a material fact, knowing it to be false.