

**Sons of the American Legion, Detachment of Colorado, Squadron 15  
Past Squadron Commander Jeffrey Mashino Memorial Fund**

---



**Jeffrey "Jeff" Mashino**

**May 27, 1957 to Jan. 16, 2011.**

Jeff served as Commander of the Sons of the American Legion for five years, revitalizing the membership to one of the largest in the state of Colorado. He also served as the Adjutant and Second Vice Commander for Sons of the American Legion, Squadron 15, Junior Vice Commander of the Sons of the American Legion, Detachment of Colorado

He was the Chairperson of the House Committee for the Associated Veterans of Loveland, curator for historical relics as a member of the Historical Preservation Committee and a Bell Ringer in the Veterans Day festivities with the Loveland Bell Ringers. He was a dear friend, avid rider and tireless supporter of veteran in the Loveland community, he will be sorely missed.



**Sons of the American Legion, Detachment of Colorado, Squadron 15**  
**Past Squadron Commander Jeffrey Mashino Memorial Fund**

---

**GENERAL GUIDELINES FOR ASSISTANCE FUND**

The Past Squadron Commander Jeffrey Mashino Memorial Fund is to provide financial assistance to worthy Loveland veterans of the United States Armed Forces and qualified members of the Sons of the American Legion who have insufficient financial resources to meet a critical or emergency need for shelter, food, and/or health care. Any Loveland, Colorado resident who is an honorably discharged veteran of the armed forces of the United States and qualified members of the Sons of the American Legion is eligible to apply for financial assistance from the Past Squadron Commander Jeff Mashino Memorial Fund.

**Application Procedure:**

Any eligible person (or someone on behalf of an eligible person) may apply for a grant of funds under this program. Application forms are available from the Associated Veterans of Loveland, 305 North Cleveland Avenue Loveland, CO 80537-5505, phone 970-667-4762.

Completed applications are to be forwarded by U.S. Mail to:

**SAL Squadron 15**

**ATTN: Jeffrey Mashino Memorial Fund,**

**305 North Cleveland Avenue Loveland, CO 80537-5505.**

The envelope is to be marked "**CONFIDENTIAL**".

**Use of the Fund:** Funds will be made to eligible persons for the purpose of meeting an essential basic need for shelter, food, clothing or health care. Grants will not be made for items that are discretionary in nature ("wants").

**Limitations:** Initially, grant applications will not be approved for more than \$500.00. (This limitation may change as the Fund grows.)

Grants will usually not be approved for the same veteran more than once a year. (A waiver may be considered in the case of a severe emergency.) Grants will not be approved to help an eligible person on a continuing basis, e.g., rents, home payments, car loans, long-term illnesses, custodial care, chronic prescription drugs.

The Fund is unable to assume the total responsibility for a veteran's major medical bills or funeral expenses.

**Proof of Eligibility:** The burden of proof of eligibility of the applicant for assistance for this fund shall rest upon the applicant. Military discharge papers generally provide sufficient documentation or current membership card showing good standing with the Sons of the American Legion, Squadron 15.

Funds are maintained in a restricted earmark account with the Sons of the American Legion, Squadron 15. The account receives donated funds from individuals, American Legion posts, American Legion Auxiliary units and local Loveland businesses.

The fund is controlled by the Executive Committee of the elected officers annually by the membership of Sons of the American Legion, Detachment of Colorado, Squadron 15, who have final approval authority on the award of funds to eligible persons.

**Sons of the American Legion, Detachment of Colorado, Squadron 15  
Past Squadron Commander Jeffrey Mashino Memorial Fund**

---

**APPLICATION FOR ASSISTANCE FUND PROCESS, (Steps 1-3)**

**1. Applicant Details**

Date \_\_\_\_\_

Name \_\_\_\_\_ Birth Date \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Gross Monthly Income \$ \_\_\_\_\_

Member of:     American Legion Post # \_\_\_\_\_     SAL Squadron # \_\_\_\_\_

Branch of Service: Army  Navy  Marine Corps  Air Force  Coast Guard

Service Number/SSN \_\_\_\_\_ Dates of Service \_\_\_\_\_

Applicants name if different from above \_\_\_\_\_

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

Phone \_\_\_\_\_ Relation to Veteran \_\_\_\_\_

Amount of funds requested \$ \_\_\_\_\_ (copies of bills requested with application)

**2. Attach a separate sheet describing the need for this assistance to include:**

1. Statement of the problem.
2. Possible solutions to the problem.
3. How the grant funds will help solve the problem.
4. Other sources of assistance that have been contacted.
5. Other sources of assistance that have been received toward the solution of this particular problem.
6. If this grant application is not approved, what will be the consequences?
7. Include proof of eligibility (DD-214 or Current American Legion or SAL Card).

**3. Mail the completed application to:**

SAL Squadron 15  
ATTN: Jeffrey Mashino Memorial Fund  
305 North Cleveland Avenue Loveland, CO 80537-5505  
"CONFIDENTIAL"

---

**For Filing Purposes:**

Grant Approved or Disapproved (Circle one): Date \_\_\_\_\_

Amount \$ \_\_\_\_\_

Checks to: \_\_\_\_\_