



DISABLED AMERICAN VETERANS, DEPARTMENT OF MICHIGAN

Albert Hughes
State Commander

Rolly Lee
State Adjutant

October 4, 2019

To all Chapter Commanders & Chapter Service Officers,

Commander,

We are asking that you share this letter and enclosed Statement of Policy for Representation.

All chapter service officers were educated on the form at the state convention in June.

National is **mandating** this form to accompany any new POA's and should be forwarded to our Detroit Regional office for **ALL** Veterans.

Mailing address:

DAV
477 Michigan Ave. / Room 1200
Detroit, Michigan 48226

Any questions regarding the form should be referred to the regional office 313-964-6595.

Respectfully submitted by
Kwan Tillman
Director DAV Detroit regional office



**FULFILLING OUR PROMISES
TO THE MEN AND WOMEN WHO SERVED**

Statement of Policy for Representation

Thank you so much for choosing DAV to assist you with your Department of Veterans Affairs benefits. DAV has a long history of providing claims assistance to veterans and their dependents and survivors. You can be sure that our national service officers and our transition service officers have been trained to assist you through the process. We provide our personnel with training and ongoing education so they can provide you with the help you need to navigate the sometimes-confusing process. Please note that DAV—not a specific person at DAV—is assisting you. We will review relevant portions of your file (when we have access), discuss possible strategies with you, prepare the necessary submissions and get them filed. (Please remember that although we may be able to access your VA file, we do not “own” that file nor do we keep copies of the file, or of any health information the file contains.)

YOU SHOULD

- Be truthful with DAV and the VA at all times.
- Respond promptly for request for information (and be on time for medical exams).
- Submit information to the VA through our office.
- Notify us of any changes (your name, address or phone number).

YOU SHOULDN'T

- Try to submit a fraudulent claim (we won't submit it if we have good reason to think it's false).
- Submit evidence, information or other "stuff" directly to the VA.
- Fail to cooperate with your service officer.
- Be abusive or harassing to any of our employees or anyone else you meet in our office.

DAV will assist you through the VA process, and you can make the job a lot easier if you remember three important things:

1. You know your own claim better than anyone else. If something is really important, call it to your service officer's attention. (Example: If you have an Intent to File pending at the VA, let us know.)
2. DAV normally does not file anything unless you ask us to do so. This is also true of appeals. If you get a VA decision that you believe is incorrect, call or visit your national service office. Don't assume that we will automatically try to “fix” a less-than-perfect outcome. Be sure that you read everything the VA sends you, including notices about deadlines.
3. Don't wait until the last minute to contact your service officer. DAV is not the VA, and we have no authority to extend filing deadlines. A late filing can negatively affect your claim, so be proactive!

Although we hope that you're with DAV for good, it is only right to tell you that you can elect a new organization to assist you at any time. You should also know that on rare occasions, we may have to withdraw from your case. That could happen if, for instance, a conflict of interest develops. DAV might also have to withdraw if, for some reason, our relationship with you becomes so contentious that it interferes with our ability to handle your case. Even if we withdraw our assistance, you can be sure that we will send you instructions on how to appoint a new representative.

If you have any questions about this statement, don't hesitate to ask. We have purposely written it in a way that we hope makes it clear what DAV will do for you and what we expect you to do for us. DAV's representation is always provided absolutely free of charge, and without regard to membership in our organization.

We are glad you chose us to assist with your benefits. By signing below, you are simply acknowledging that you received this statement. If you don't sign it as a result of an electronic appointment of DAV through e-Benefits, we will make a note in our system ensuring that we send one to you. If you don't sign for any other reason, we'll make a note in our system that we provided you with a copy.

DAV looks forward to assisting you and your family.

Date _____

Name _____ Signature _____



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