



State of Colorado

Department of Military and Veterans Affairs

Military Funeral Honors Stipend Request



Instructions to apply for the benefit

A local unit of a congressionally chartered Veterans Service Organization (VSO) or its auxiliary is eligible under Colorado Statute 28-5-507 to receive a \$75 stipend for providing an honor guard detail at the funeral of an eligible honorably deceased veteran. Second, third, and fourth honors services performed on the same day can also receive up to an additional stipend of \$25 each for expenses incurred for mileage, transportation costs, and meals, not to exceed \$75 in total. If the local unit provides a student to play "Taps," the local unit may pay some or all the stipend to the student. Stipends will be paid based upon availability of funds. To be eligible to receive the reimbursement:

- The VSO must first provide a copy of their congressional charter to the Stipend Program manager at honorguardstipend@dmva.state.co.us to determine organizational eligibility.
- The VSO must then register as a state supplier and receive a vendor ID number. Once acquired, provide the vendor ID number to the Stipend Program manager to complete registration in the program. Instructions on how to obtain your current or new vendor ID number can be found at: <https://osc.colorado.gov/spco/accesscolorado>
- If you have any question regarding vendor registration, please contact the Vendor Self Service (VSS) helpline at (303) 866-6464
- The veterans DD-214 must indicate that the veteran was honorably discharged (Honorable or Under Honorable Conditions). Veterans being interred at a national or state cemetery must also meet the burial and memorial benefit guidelines set forth in the Federal Benefits Pamphlet 80-19-01(pages 63-69). Veteran eligibility must be verified by DD-214 by the VSO. If assistance is required to verify service, contact your County Veterans Service Officer. **DO NOT attach DD-214's to your request.**
- The VSO is responsible for obtaining all original signatures and submitting the Military Funeral Honors Stipend Request. **Incomplete requests will cause delays in processing.**
- The Department shall allocate stipend funds to the VSO for providing up to four honors services on any given day. A flat rate of \$75 shall be applied to the first honors service provided. Stipend requests for expenses incurred for second, third, and fourth honors services performed on the same day shall be paid a maximum of \$25 each, or the actual value of expenses incurred for mileage, transportation costs, and meals; *whichever the lesser value*. **Receipts for expenses incurred for each additional service must be submitted along with the request to be eligible for consideration (Copies will suffice).**
- The VSO is required to submit a Military Funeral Honors Stipend Request, which will verify that the veterans group, post or chapter has performed honors on a given date. **Requests must be submitted within 15 days of honors performed.** Forms can be mailed, e-mailed to or faxed to:
Honors Stipend, Veterans Memorial Cemetery, 2830 Riverside Pkwy, Grand Junction CO 81501
e-mail: HonorGuardStipend@dmva.state.co.us Fax: (970) 257-7450.
- The VSO must perform honors in accordance with the National Defense Act of 2000 (Public Law 106-65.) Military funeral honors detail shall, at a minimum, perform at the funeral a ceremony that includes the folding and presentation of the U.S. flag and play "Taps," either by a high-quality recording or by a bugler. The law defines a military funeral honors detail as two or more former or active uniformed military persons, with at least one being a member of the veteran's branch of military service. Additional honors such as a firing (rifle) detail may be provided if resources are available.



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Payment Examples

Scenario 1 Stipend

Reimbursement for one service \$75

Invoice Total: \$75

Scenario 2

1st Service \$75

2nd Service expenses ~ \$18 \$18

Invoice Total: \$93

Scenario 3

1st Service \$75

2nd, 3rd, 4th Service expenses ~ \$120 \$75

Invoice Total: \$150

Stipend requests for expenses incurred for second, third, and fourth honors services performed on the same day shall be paid a maximum of \$25 each, or the actual value of expenses incurred for mileage, transportation costs, and meals; *whichever the lesser value*. **Receipts for expenses incurred for each additional service must be submitted along with the request to be considered.**

In scenario 1 the flat rate stipend of \$75 is paid for one service.

In scenario 2 the expenses reported for the second service performed totaled \$18, which is less than the \$25 stipend maximum. The lesser amount of \$18 is paid.

In scenario 3 the expenses reported for the second, third, and fourth services performed totaled \$120, which exceeds the \$75 stipend maximum (\$25 x 3). The lesser amount of \$75 is paid.

The Department will pay a maximum of \$150 for honors services performed and expenses incurred, per day, to any VSO.



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A Veterans Service Organization (VSO) will submit this form to request a stipend for performing military funeral honors. The responsibility for proper completion and submission of this form rests with the VSO. The Colorado Department of Military and Veterans Affairs will issue stipend payments for up to four honors services performed per day; not to exceed \$150. Please see "Instructions to Apply for the Benefit" sheet for additional guidance.

- Requests must be received within **15 days** of honors being provided.
- The VSO is responsible for obtaining the mandatory signatures from the Honor Guard Leader and verification from the Funeral Director or cemetery representative.
- Eligibility for each veteran must be verified by DD-214. **DO NOT** attach DD-214's with this form.
- Requests can be mailed, e-mailed, or faxed. An incomplete form will cause delays in processing.

PART I: VSO Performing Honors

Honor Guard Unit: _____ Vendor #: _____
Unit Address: _____ City & Zip: _____

Point of Contact (please print): _____ Phone #: _____

Honors performed (check the box that applies):

Full Honors (Rifle Detail, Taps, Flag Folding)

Basic Honors (Flag Folding & Taps)

Signature of Honor Guard Leader: _____ Date: _____

PART II: Information – Deceased Veteran

DD-214 Eligibility Confirmed by VSO

Name of Veteran Last: _____ First: _____ M: _____

Date Honors Performed: _____

Location of Honors: City: _____ County: _____

Branch of Service: U.S. Army U.S. Navy U.S. Coast Guard ☐ U.S. Space Force
U.S. Marine Corps U.S. Air Force Merchant Marine

PART III: Verification (Must be completed by Funeral Director or Cemetery Representative)

Were the military honors performed in an acceptable manner? Yes No

Name of Organization: _____

City: _____ Phone #: _____

Representative Printed Name: _____

Representative Signature: _____ Date: _____

Mail, e-mail, or fax this form to:

Honors Stipend, Veterans Memorial Cemetery, 2830 Riverside Parkway, Grand Junction CO 81501
HonorGuardStipend@dmva.state.co.us Office: (970) 263-8986 Fax: (970) 257-7450

For Office Use Only

PAYMENT INFORMATION

Intake Date: _____ Amount: _____ Entered By: _____ Invoice Number: _____

Additional Military Funeral Honors (copy as needed – must attach to completed page 1)

Honor Guard Unit: _____

Vendor #: _____

Full Honors (Rifle Detail, Taps, Flag Folding)

Basic Honors (Flag Folding, Taps)

PART II: Information – Deceased Veteran

DD-214 Eligibility Confirmed by VSO

Name of Veteran Last: _____ First: _____ M: _____

Date Honors Performed: _____

Location of Honors: City: _____ County: _____

Branch of Service: U.S. Army U.S. Navy U.S. Coast Guard U.S. Space Force
U.S. Marine Corps U.S. Air Force Merchant Marine

PART III: Verification (Must be completed by Funeral Director or Cemetery Representative)

Were the military honors performed in an acceptable manner? Yes No

Name of Organization: _____

City: _____ Phone #: _____

Representative Printed Name: _____

Representative Signature: _____ **Date:** _____

For Office Use Only

PAYMENT INFORMATION

Intake Date: _____ Amount: _____ Entered By: _____ Invoice Number: _____

Full Honors (Rifle Detail, Taps, Flag Folding)

Basic Honors (Flag Folding, Taps)

PART II: Information – Deceased Veteran

DD-214 Eligibility Confirmed by VSO

Name of Veteran Last: _____ First: _____ M: _____

Date Honors Performed: _____

Location of Honors: City: _____ County: _____

Branch of Service: U.S. Army U.S. Navy U.S. Coast Guard U.S. Space Force
U.S. Marine Corps U.S. Air Force Merchant Marine

PART III: Verification (Must be completed by Funeral Director or Cemetery Representative)

Were the military honors performed in an acceptable manner? Yes No

Name of Organization: _____

City: _____ Phone #: _____

Representative Printed Name: _____

Representative Signature: _____ **Date:** _____

For Office Use Only

PAYMENT INFORMATION

Intake Date: _____ Amount: _____ Entered By: _____ Invoice Number: _____