

VAFAP REP Manager: Chief Financial Officer 434-298-6385

VAFAP AP Supervisor: 434-298-6166

ng.va.vaarng.mbx.vafa-accounts-payable@army.mil



VAFAP Referral Control Number: _____

(VAFAP use only)

Referral Enlistment Program (REP) Referral Submission Form

Department of Military Affairs (DMA) will provide \$500.00 to an eligible referrer within 30 days of receiving complete REP packet and successful enlistment validation of the referred. Recruiters will send the referral submission form and W9 to Recruiting & Retention (R&R) REP Coordinator. **Funds are contingent upon availability** and follow the state fiscal year of July 1 – June 30. Funds are \$50K annually per code of Virginia Budget Bill HB6001 Item 465 with 80% granted to the Virginia Army National Guard and 20% granted to the Virginia Air National Guard. One packet will be generated for each enlistment. Referrers can have multiple enlistments and active packets.

Enlisting (Referred) Individual Information (Complete by Referrer)

Name (Last, First, Middle): _____

Address: _____

Phone #: _____ Email: _____

Signature and Date: _____

Referring (funds recipient) Individual Information (Complete by Referrer)

Name (Last, First, Middle): _____

Address: _____

Phone #: _____ Email: _____

Signature and Date: _____

Recruiters submit to R&R Headquarters

- Referral Submission Form (filled out by referrer)
- W-9 (referring individual / fund recipient, filled out by referrer)

Recruiter Signature and Date: _____

R&R REP Coordinator submit complete packet to Accounts Payable

- Referral Submission Form
- W-9 (referring individual / fund recipient)
- R&R Validation Memo of Successful Enlistment

R&R Signature and Date: _____

Email completed documents to DMA Accounts Payable: ng.va.vaarng.mbx.vafa-accounts-payable@army.mil

Accounts Payable submit to DMA Chief Financial Officer

- Items listed above
- Voucher Transmittal (to be signed by CFO)
- Cardinal ID verification

AP Supervisor Signature and Date: _____