Apportionments

Trainee Handout

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Objectives

* Provide an overview of the regulatory requirements for an apportionment determination
* Accurately establish a claim for an apportionment
* Evaluate the evidence needed to determine eligibility for an apportionment
* Identify the process of granting or denying an appointment

# References

38 U.S.C. 1505, Payment of pension during confinement in penal institutions

38 U.S.C. 5307, Apportionment of benefits

38 U.S.C. 5502(d), Payments to and supervision of fiduciaries

38 U.S.C. 5503, Hospitalized Veterans and estates of incompetent institutionalized Veterans

38 U.S.C. 6103(e), Forfeiture for fraud

38 U.S.C. 6104(c), Forfeiture for treason

38 CFR 3.450, Apportionment – General

38 CFR 3.451, Special Apportionments

38 CFR 3.453, Veterans compensation or service pension or retirement pay

38 CFR 3.454, Veterans disability pension

38 CFR 3.458, Veteran’s benefits not apportionable

38 CFR 3.459, Death Compensation

38 CFR 3.460, Death Pension

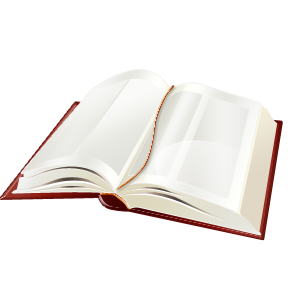
38 CFR 3.461, Dependency and indemnity compensation

M21-1.III.subpart ii.5.AJurisdiction Over Claims Folders

M21-1.III. subpart v.3.A Apportionment Process

M21-1.III.subpart v.3.B Adjusting Apportioned Award

**Basic Principles**

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**Apportionment –** When a claimant(s) requests a “portion” of the Veteran’s pension or compensation or in the case of a deceased Veteran a portion of the DIC or death pension.

**38 CFR 3.450 –** **General** (**Apportionment)** All or any part of the pension, compensation or emergency officers’ retirement pay payable on account of any Veteran may be apportioned to the following:

* An estranged spouse and child or children in the spouse's custody
* A child or children not living with the primary beneficiary or surviving spouse and to whom the primary beneficiary or surviving spouse is not reasonably contributing, or
* A dependent parent (in compensation cases).

**If:**

* The Veteran is incompetent and is being furnished hospital treatment, institutional or domiciliary care by the US or any political subdivision thereof; or
* The Claimant(s) lives apart from the Veteran and is not receiving a reasonable level of support; or
* Any of the children of a deceased Veteran who are not living with the Veteran’s surviving spouse may be apportioned

**38 CFR 3.451- Special Apportionment** - Without regard to any other provision regarding apportionment where hardship is shown to exist, pension, compensation, emergency officers' retirement pay, or dependency and indemnity compensation may be specially apportioned between the Veteran and his or her dependents or the surviving spouse and children on the basis of the facts in the individual case as long as it does not cause undue hardship to the other persons in interest, except as to those cases covered by §3.458(b) and (c).

In determining the basis for a special apportionment, consideration will be given to such factors as:

* Amount of Department of Veterans Affairs benefits payable;
* Other resources and income of the Veteran and those dependents in whose behalf an apportionment is claimed;
* Any special needs of the Veteran, his or her dependents, and the apportionment claimants.

**38 CFR 3.458 - Veterans benefits not apportionable**

**j0424468**

*Apportionment cannot be paid in the following situations:*

1. Where the ***total benefit payable*** to the disabled person does not permit payment of a reasonable amount to any apportionee.
2. Where the spouse of the disabled person has been found ***guilty of conjugal infidelity*** by a court having proper jurisdiction.
3. For purported or legal spouse of the Veteran if it has been determined that he or she has ***lived with another person*** and held herself or himself out openly to the public to be the spouse of such other person, except where such relationship was entered into in good faith with a reasonable basis (for example trickery on the part of the Veteran) for the spouse believing that the marriage to the Veteran was legally terminated.
4. Where the child of the disabled person has been ***legally adopted by another person***, except the additional compensation payable for the child.
5. Where a ***child enters the active military, air, or naval service***, any additional amount will be paid to the Veteran unless such child is included in an existing apportionment to an estranged spouse. No adjustment in the apportioned award will be made based on the child’s entry into service.
6. For the spouse, child, father or mother of a disabled Veteran, where forfeiture was declared prior to September 2, 1959, if the dependent is determined by the Department of Veterans Affairs to have been ***guilty of mutiny, treason, sabotage, or rendering assistance to an enemy of the United States*** or its allies.
7. For any dependent of a disabled Veteran, or surviving spouse where forfeiture of benefits by a person primarily entitled was declared after ***September 1, 1959, by reason of fraud, treasonable acts, or subversive activities***.
8. Until the estranged spouse of a Veteran files claim for an apportioned share. If there are ***any children of the Veteran not in his or her custody*** an apportionment will not be authorized unless and until a claim for an apportioned share is filed in their behalf.

**Processing an Apportionment**

**pe01569_**

When the Department of Veterans Affairs (VA) receives a claim for an apportionment of a primary beneficiary's benefits, VA must:

* Develop for evidence
* Decide whether to award or deny the apportionment claim, and
* Notify the primary beneficiary and claimant of the decision.
* Additionally, in some cases, VA must offset or withhold part or the entire apportioned award.

**Competent Primary Beneficiary**

In order for a claimant to receive an apportionment of a competent primary beneficiary’s benefits, the claimant must:

* File a claim for an apportionment, and
* Demonstrate need for the benefit, or
* Live apart from the Veteran and not be receiving a reasonable level of support

If the requirements above are met and the primary beneficiary will *not* suffer undue hardship, VA may authorize an apportionment of the primary beneficiary's benefits to be paid to the claimant. ***Important***: VA's primary obligation is to the primary beneficiary. Even if the claimant demonstrates a need, VA cannot impose undue hardship on the primary beneficiary.

**Establishing a claim for apportionment**

|  |  |  |
| --- | --- | --- |
| **Task** | **Remark** | **Reference** |
| **Signed Request Received** | In order for a claimant to receive an apportionment of a competent primary beneficiary’s benefits, the claimant must file a claim on [*VA Form 21-0788*](http://www.vba.va.gov/pubs/forms/VBA-21-0788-ARE.pdf)*, Information Regarding Apportionment of Beneficiary’s Award.*   * If a claimant requests an apportionment on or after that date on anything other than a [*VA Form 21-0788*](http://www.vba.va.gov/pubs/forms/VBA-21-0788-ARE.pdf),   + treat the correspondence as a request for an application, and   + follow the instructions in [M21-1, Part III, Subpart v, 3.A.1.c](https://vaww.compensation.pension.km.va.gov/system/templates/selfservice/va_ka/#1c). | M21-1 III.v.3.A.1.b |
| **Verify the location of the C-file/e-Folder/NOD folder for the Veteran** | The claim folder/electronic record of a living Veteran is under the jurisdiction of the regional office (RO) that is assigned to the geographical area where the Veteran maintains a permanent (even if the folder is in storage at Records Management Center (RMC), or Federal Records Center (FRC).  If the claim folder exists at another location, forward the claim to the RO that currently maintains the C-file. The office having possession of the folder will determine whether a transfer of the folder is necessary. | M21-1 III.ii.5.A |
| **Is the apportionment valid?** | To determine if the claimant requesting the apportionment is valid, check the Veteran’s c-file or Share to verify that the relationship has been established between the claimant and Veteran.  If the necessary evidence is not apart of the claim file, you will need to state the request for the necessary documents in the development letter to the claimant.  The Veteran is not a valid claimant. The request must come from a dependent such as spouse, child, or parent who qualifies as a claimant. However, the Veteran (if incarcerated), may invite the apportionment claim on behalf of his/her dependents M21-1 III.v.8.B.5.c | Share User Guide |
| **Is there a bar to benefits under 38 CFR 3.458?** | Review list in student guide for determination.  If there is no bar to an apportionment, simultaneous development and predetermination letters to request the required evidence from the primary beneficiary, and apportionment claimant (Requires concurrent control of the issue with EP 130 for the claimant and EP 600 for Veteran) | 38 CFR. 3.458 |
| **Is there a current award?** | Establish EP. An apportionment claim should be denied if the Veteran has no running award.  Once it is determined that you have jurisdiction over the claim and the claim folder exists at your RO, establish an EP 130 for the claimant and establish a 600 for the Veteran. | Share User Guide |
| **Development to the Primary Beneficiary** | Request a statement as to the amount and frequency of any support or contributions being made to or on behalf of the claimant, or an explanation of the reasons for non-support, if the primary beneficiary is not making any contributions, and proof of the contributions such as, canceled checks or any receipts (if there is any conflicting information between the beneficiary and the claimant, as to the primary beneficiary's contributions of support). | M21-1 III.v.3.A.2.d |
| **Development to the primary beneficiary, claimant(s) and claimant’s custodian (if applicable)** | A statement of net worth, annual income and expenses an explanation of any hardship that would be created or experienced by the primary beneficiary if the apportionment was made, and claimant if the apportionment was not made.  *VA Form 21-0788, Information Regarding Apportionment of Beneficiary's Aw*ard should be used for this development. | M21-1 III.v.3.A.2.d  38 CFR 3.451  38 CFR 3.204 |
| **Due Process for Requested Evidence From the Primary Beneficiary and Claimant**  **FAQ dated December 8, 2008 and FL08-18** | When evidence is requested from the primary beneficiary and the claimant, advise both parties that:   * The primary beneficiary will have 60 days and the claimant will have 30 days to present evidence * A decision will be made after the expiration of 60 days on the basis of the evidence of record, unless extension of time is required for good cause.   In addition, advise the primary beneficiary   * Of any withholding established * Of the statutory authority for apportionment of the effective date from which an apportionment may be made on the basis of the pending claim (and * That the amount of his/her award will be reduced by the monthly amount of the apportionment authorized. | * 38 U.S.C. 5307, * 38 CFR 3.400(e) |
| **Withholding Action and EP Control** | When initial development is sent to primary beneficiary and claimant   * Establish EPs 130 for the claimant and 600 for the Veteran for control, and * Amend the primary beneficiary's award to provide for a Type 1 withholding effective the first day of the month following the month in which the notice of proposed adverse action period elapses. * The amount of withholding from the primary beneficiary's benefits is equal to the amount apportioned to the claimant. However, the apportioned amount will be estimated at this time, since all evidence necessary for a final decision may not be of record. | M21-1 III.v.3.A.2.e |
| **Handling a Request for a Hearing** | If, within 30 days of the release of the notice of proposed adverse action, the Veteran or surviving spouse requests a hearing and a final decision cannot be made before the end of the 65-day control period, amend the effective date of the Type 1 withholding so that payments to the Veteran or surviving spouse are not reduced until after a final decision is reached.  The EPs will continue until the final decision is made. | M21-1 III.v.3.A.2.g |

**Example of Apportionment Due Process Letter to Veteran**

**Department Of Veterans Affairs**

**Regional Office**

**3000 Patriotic Way**

**Anywhere USA 11111**

July 6, 2009

|  |  |
| --- | --- |
| Milton Waddams  156 Intel Ave  Swingline, USA 11111 | In reply, refer to:  File Number: xxx xx xxxx  Milton Waddams |

**IMPORTANT – reply needed**

Dear Milton Waddams,

We have received a claim from Jan Lumbergh, on behalf of your child, Bill, for a part of your monthly benefits. Title 38 U.S.C. 5307 (formerly 3107) permits an apportionment of your benefits. We will begin withholding $150.00 from your monthly benefits effective October 1, 2009, until a final decision is made. If an apportionment is granted your award will be retroactively reduced by the amount of the apportionment affective July 1, 2009, the first of the month following receipt of the apportionment claim.

**What Do We Still Need From You?**

We need additional information before we can make a final decision on this claim. ***Please put your VA file number on the first page of every document you send us.***

1. Please complete each item on the enclosed VA From 21-0788, Information Regarding Apportionment of beneficiary’s Award, and sign on the bottom. You may use the enclosed copy for your records.
2. You should provide any evidence of child, support, alimony, and maintenance payments being made. Please furnish court records, canceled checks or money orders showing payments made in the last 12 months.

**Where Should You Send What We Need?**

Please send the requested items to this address:

DEPARTMENT OF VETERANS AFFAORS

REGIONAL OFFICE

XXXX PATRIOTIC WAY

ANYWHERE, USA 11111

**How Soon Should You Send It?**

***Please send us any additional information or evidence within 60 days of the date of this letter,*** or we may process your claim based only on what we already have.

You have certain basic rights you may exercise before the proposed action is taken. These consist of the right to submit additional evidence to show why the proposed action should not be taken, the right of a hearing and the right to be represented.

**Submission of Evidence.** We will continue your payments at the present rate for 60 days following the date of this notice. This is allowing you time to submit new evidence showing that we should not take the proposed action. You may submit evidence on person, by mail or through your accredited representative.

If, within 60 days, we receive evidence we have not already considered we may delay the change until after we thoroughly review it. We will still carefully consider any evidence you submit after we adjust your benefits. However, the adjusted status will continue while we review it.

**Minimizing Potential Overpayment**. You may not be due the full amount paid for the next 60 days. If you accept the payments and we decide to take the proposed action, you will have to repay all or part of the benefits you receive during the 60 days. We can reduce the potential overpayment by adjusting your benefits before the 60-day period ends. If you would like us to take this action, send us a statement asking that we adjust your payments beginning with your net check. If you make this request, and at the end of 60 days our review shows that you should have received the higher rate, we will restore the full rate from the date it was reduced.

**Personal Hearing**. You can request a personal hearing to present evidence or argument on any important point in your claim. We will arrange a time and place for the hearing. You may bring witnesses who have personal knowledge of the circumstances. We will consider their testimony and keep it as part of our permanent records. We will furnish the hearing room, provide hearing officials, and prepare the transcript of the proceedings. We cannot pay for other expenses of the hearing, since we hold a personal hearing only upon a claimant’s request.

If we receive your request for a hearing within 30 days we will continue payments at the present rate until the hearing is held and we receive the hearing testimony.

However, this will not change the proposed adjustment date if we decide to take the proposed action. Please understand that by continuing the current rate during this period, we may be overpaying you. If you request a hearing but wish to reduce the possible overpayment, send is a statement asking that we reduce or suspend your benefits beginning with your next check.

After 30 days you may request a hearing, but benefits will have been adjusted as explained earlier in this notice.

**Representation.** As accredited representative of a Veteran’s organization or other service organization recognized by the Secretary of Veterans Affairs will represent you without charge. An agent or attorney may also represent you. However, an agent or attorney can also charge you for services performed on or after the date of a final decision by the Board of Veterans Appeal (38 U.S.C. 5904(c)).

**How Can You Contact Us?**

You can contact us in several ways. Please let us know your VA file number, CSS XXX XX XXXX, when you contact us.

* Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the number is 1–800-829-4833.
* E-mail or visit our web site. For specific information about your claim, you can send us an e-mail by visiting us at <http://iris.va.gov>. For general information about benefits, visit our web site at [www.va.gov](http://www.va.gov).
* Write to us at the address at the top of this letter.

We have enclosed information about Veterans’ service organizations and how they help you.

Sincerely yours,

J. R. Ewing

Veterans Service Center Manager

Enclosure(s): VA Form 21-0788(s)

**Example of Development Letter to Claimant**

**Department of Veterans Affairs**

**Regional Office**

**3000 Patriotic Way**

**Anywhere, USA, 11111**

|  |  |
| --- | --- |
| JAN LUMBERGH  CUST OF  BILL LUMBERGH  2100 FLAIR RD  SWINGLINE, USA XXXXX | In reply, refer to:  000/XX/XX  File Number: XXX XX XXXX  Milton Waddams |

**IMPORTANT –reply needed**

We received your claim for an apportionment of the Veteran’s benefits on behalf of your child, Bill. However, we need additional information.

What Do We Still Need From You?

We need additional information or evidence from you. Please put the VA file number on the first page of every document you send us.

1. Please complete and sign the enclosed VA Form 21-0788, Information Regarding Apportionment of Beneficiary’s Award, and return it to us. You may use the enclosed copy for your records.
2. You should provide any evidence of child support, alimony, or maintenance payments being made. Please furnish court records showing payments or arrears for the last 12 months.

**Where Should You Send What We Need?**

Please send the requested to this address:

DEPARTMENT OF VETERANS AFFAIRS

REGIONAL OFFICE

3000 PATRIOT WAY

ANYWHERE, USA 11111

**What Have We Received?**

Your claim for benefits, which was received on June 29, 2009

**How Soon Should You Send It?**

Please send us any additional information or evidence within 60 days of the date of this letter, or w may process your claim based only on what we already have.

The requested information is essential to the determination of your apportionment claim. You may submit evidence in person, through the mail or through your accredited representative. Please send is the requested evidence as soon as possible preferable within 60 days, because a decision will be made at that time on the basis of the evidence of record unless extension of time is requested for good cause.

**Personal Hearing.** You can request a personal hearing to present evidence or argument on any important point in your claim. We will arrange a time and place for the hearing. You may bring witnesses who have personal knowledge of the circumstances. We will consider their testimony and keep it as part of our permanent records. We will furnish the hearing room, provide hearing officials, and prepare the transcript of the proceedings. We cannot pay for other expenses of the hearing, since we hold a personal hearing only upon a claimant’s request.

**Representation.** An accredited representative of a Veteran’s organization or other service organization recognized by the Secretary of Veterans Affairs will represent you without charge. An agent or attorney may also represent you. However, an agent or attorney can also charge you for services performed on or after the date of a final decision by the Board of Veterans Appeals (38 U.S.C.5904(c)).

Tell us if you want someone to represent you and we will send you the necessary forms.

**How can you Contact Us?**

You can contact us in several ways. Please let us know the VA file number CSS XXX XX XXXX, when you contact us.

* Call us at 1-800-827-1000. If you use Telecommunications Device for the Deaf (TDD)
* Email or visit our web site. For specific information about your claim, you can send us an e-mail by visiting us a http://iris.va.gov. For general information about benefits, visit our web site at [www.va.gov](http://www.va.gov)
* Write to us at the address at the top of this letter.

We are trying to decide claims as quickly as possible. We appreciate your help.

Sincerely yours,

**J. R. Ewing**

Veterans Service Center Manager

Enclosure(s): VA Form 21-0788(2)

What Are Veteran’s Service Organizations and How Can They help you?

**Making an Apportionment Decision**

**j0424832**

When development is completed or the 65-day control period expires, whichever is later, prepare the apportionment decision based on an evaluation of the evidence of record.

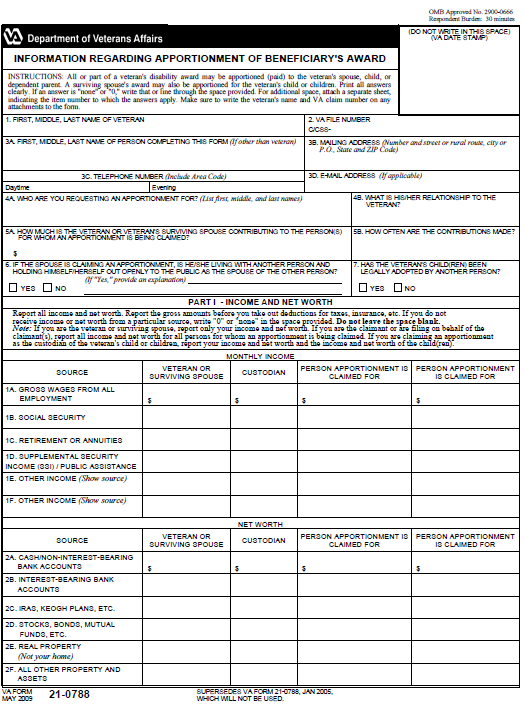
**Disclosing Information to the Primary Beneficiary and or Claimant**

Upon request of either of the following individuals, disclose information in the claims folder that affects the payment or potential payment to a claimant for apportionment:

* The primary beneficiary, and/or
* The claimant for an apportionment of the primary beneficiary's benefits.

If receipt of information from Privacy Act forbids a total disclosure of correspondence or other submissions from either party to the other, separately furnish the information, which is vital to the decision to be made.

***Example***: Information vital to the decision, which is to be made, will usually include disclosure of income and expenses of the parties.





A formal memorandum for file is required for both favorable and unfavorable decisions on claims for apportionment.

Used to summarize the income and expense information and make a decision to grant or deny the apportionment.

Due to the importance of administrative decisions and the fact that they are subject to review by beneficiaries and their representatives, all special apportionment decisions, are computer-generated or type-written.

**Denying an Apportionment**

j0440412

You may deny a claim for an apportionment for the following reasons:

1. **Invalid claimant.** Remember that the Veteran is not a valid claimant for apportionment (unless the Veterans is incarcerated M21-1MR.III.v.8.B.5.c). The request must come from a dependent such as a spouse, child, or parent who qualifies as a claimant.
2. **No running award.** An apportionment claim would be denied if the Veteran has no running award.
3. **Claimant’s information not received**. If the Veteran does not return his or her income and expense information, the claim is not denied. The VSR will make a decision based on the evidence submitted.
4. **Sufficient support provided.** If after evaluating the income and expense information for the Veteran and the claimant, you determine that the Veteran does contribute support and the support is sufficient to the claimant, you will deny the claim for apportionment.
5. **Hardship to the Veteran.** If upon receiving income and expense information from the Veteran/payee, you have calculated that apportioning any money will cause a hardship for the Veteran--deny the claim.

**Some other reasons a claim for an apportionment may be denied:**

* Benefit does not permit payment of reasonable amount
* Spouse guilty of infidelity
* Legal spouse lives with someone else and held himself/herself out as the spouse of another person
* Child has been adopted
* Child enters service

**Granting an Apportionment**

j0439847

**If an apportionment should be made the amount should be determined from:**

* An equitable assessment of any hardship, or
* The claimant’s demonstrated need
* Amount of VA benefits available
* Other resources and income of the primary beneficiary and the claimant
* Special needs of the primary beneficiary and the claimant.

Specific criteria should be considered when evaluating an apportionment claim under different benefit programs.

|  |  |
| --- | --- |
| **Benefit Program** | **Criteria** |
|  |  |
| Compensation | 38 CFR 3.451 |
| Service Pension | 38 CFR 3.453 |
| Death Pension | 38 CFR 3.453 & 38 CFR 3.460 |
| Live Pension | 38 CFR 3.450 or 38 CFR 3.451 |
| DIC | 38 CFR 3.461(b)(1) |
| Live Pension adjusted for a hospitalized or incompetent Veteran | 38 CFR 3.454 |

Once a decision has been made to grant an apportionment, you will prepare the notification letter to inform the Veteran and claimant of the decision to grant the award.

Grant letters should contain the following:

* Amount to be apportioned to each individual
* Effective date of award
* Reminder to keep VA informed of any changes on status of the person or persons for whom the benefits are authorized to avoid an overpayment
* Appeal Rights

**Practical Exercise #1**

**Scenario #1**

On June 29, 2015, the custodian of the Veteran’s child Jan Lumbergh, submitted a request for an apportionment of the Veteran’s VA compensation award on VA Form 21-0788.

30% Service connected for a spouse and three children under 18 yrs old

Jan Lumbergh (estranged spouse)

Bill (biological child of vet and Jan Lumbergh)

Milton Jr. (biological child of vet, lives with mother in Dallas)

Sandra (biological child of vet, lives with mother in Dallas)

On July 6, 2015 - Sent both the Veteran and the custodian of the Veteran’s child Bill Lumbergh letter requesting additional evidence and income information.

On August 15, 2015 - Received Ms. Lumbergh’s financial status report

Monthly Income - $1,916.00

Monthly expenses - $830.00

Cash on hand - $25.00 (checking/savings accounts)

On August 17, 2015 – Received Mr. Milton Waddams financial status report with the following information

VA benefits $497.00 (30%)

Other monthly income - $0.00

Monthly Expenses - $1200.00 (including $55.00 towards child support for Bill)

Cash on hand, - $0.00 (checking/savings accounts)

Other assets - $0.00

30% Service connected for a spouse and three children under 18 yrs old

Jan Lumbergh (estranged spouse)

Bill (biological child of vet and Jan Lumbergh)

Milton Jr. (biological child of vet, lives with mother in Dallas)

Sandra (biological child of vet, lives with mother in Dallas)

Based upon the evidence above ONLY, Render a decision utilizing the attached VA Form 441, *Special Apportionment Decision*, and identify the pertinent law(s) and regulation(s) to support your decision, as well as a brief narrative in the discussion session, and your reasons and bases for the decision.

**Scenario #1**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Department of Veterans Affairs** | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | 1. STATION | | | |
| **SPECIAL APPORTIONMENT DECISION** | | | | | | | | | | | | | |  | | | |
|  | | | | | | | | | | | | | |  | | | |
| 2. NAME OF VETERAN | | | | | | | | | | | | | | 3. FILE NO. | | | |
| **Milton Waddams** | | | | | | | | | | | | | | C- XXX XX XXX | | | |
| 4. NAME OF CLAIMANT | | | | | | | | | | | | | | 5. RELATIONSHIP OF CLAIMANT | | | |
| **Jan Lumbergh** | | | | | | | | | | | | | | **Cust of child of Veteran** | | | |
| 6. VA BENEFIT | | | | | | | | | | | | | | | | |
| DIS. COMP DIS. PENSION D.I.C. DEATH COMP. DEATH PENSION RETIREMENT | | | | | | | | | | | | | | | | | |
| **RESOURCES AND EXPENSES** | | | | | | | | | | | | | | | | | |
| LINE  NO. | | | ITEM  (A) | | | | | |  | VETERAN OR WIDOW  (B) | | | |  | CLAIMANT(S)  (C) | | |
| 1 | | | PRESENT MONTHLY AWARD *(VA benefits)* | | | | | | $ |  | | | |  |  | | |
| 2 | | | OTHER MONTHLY INCOME | | | | | |  |  | | | |  |  | | |
| 3 | | | TOTAL MONTHLY INCOME | | | | | |  |  | | | |  |  | | |
| 4 | | | MONTHLY EXPENSES | | | | | |  |  | | | |  |  | | |
| 5 | | | NET INCOME AFTER EXPENSES | | | | | |  |  | | | |  |  | | |
| 6 | | | LIQUID ASSETS *(Cash on hand, checking and savings accounts, etc.)* | | | | | |  |  | | | |  |  | | |
| 7 | | | OTHER ASSETS | | | | | |  |  | | | |  |  | | |
| **SPECIAL NEEDS** | | | | | | | | | | | | | | | | | |
| 7A. VETERAN OR WIDOW | | | | | | | | | | | 7B. CLAIMANT(S) | | | | | |
| NONE | | | | | | | | | | | NONE | | | | | |
| 8. DISCUSSION: | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| 9. APPORTIONMENT | | | | | | | | 10. AMOUNT ALLOWED | | | | | | | | | |
|  |  | DENIED | | |  | ALLOWED | |  | | | | | | | | | |
|  | | | | | | | |  | | | | | | | | | |
| 11A. SUBMITTED BY: *(Signature of Adjudicator)* | | | | | | | | 11B. DATE | | | | 12A. APPROVED BY *(Signature of Authorizer)* | | | | 12B. DATE | |
|  | | | | | | | |  | | | |  | | | |  | |
| **VA** FORM  FEB 1990 | | | | **21-441** | | | EXISTING STOCKS OF VA FORM 21-441, APR 1971,  WILL BE USED | | | | | | U.S. G.P.O.: 1993 - 301-790 / 94748 | | | | |

**Practical Exercise #2**

1. Give (3) reasons why an apportionment should be denied?
2. Is there a formal application for requesting an apportionment?
3. Once an apportionment decision has been made how much time does the Veteran and the claimant have to appeal the decision?
4. Are we required to provide due process to the Veteran in an increased apportionment award to a payee?
5. A claim for the apportionment has a date stamp of 05-01-08. What would be the correct payment date?