



Department of Veterans Affairs

**OLD LAW AND SECTION 306 ELIGIBILITY
VERIFICATION REPORT
(VETERAN)**

2V

FIRST, MIDDLE, LAST NAME OF VETERAN

VA FILE NUMBER

YOUR COMPLETE MAILING ADDRESS

VA REGIONAL OFFICE RETURN ADDRESS

FEES FOR CLAIMS: Section 5904, Title 38, United States Code (codified in § 14.636, Title 38, Code of Federal Regulations) contains provisions regarding fees that may be charged, allowed, or paid for services provided by a VA-accredited attorney or agent in connection with a proceeding before the Department of Veterans Affairs with respect to a claim for benefits under laws administered by the Department. Generally, a VA-accredited attorney or agent may charge you a fee for assisting in seeking further review of a claim for VA benefits only after VA has issued an initial decision on the claim and the attorney or agent has complied with the applicable power-of-attorney and the fee agreement requirements.

IMPORTANT: Please read the enclosed EVR Instructions (VA Form 21P-0510) before completing this form. This form is used by veterans receiving Old Law or Section 306 Pension. If you have been receiving a fixed rate of pension since 1960, you receive Old Law Pension. If you have been receiving a fixed rate of pension since 1978 you receive Section 306 Pension. If you receive Old Law Pension, do not complete Item 7G, Net Worth, and Item 8, Family Medical Expenses. If you receive Section 306 Pension, complete all items.

1A. YOUR SOCIAL SECURITY NUMBER

1B. YOUR SPOUSES'S SOCIAL SECURITY NUMBER

1C. FIRST, MIDDLE, LAST NAME OF YOUR SPOUSE

1D. YOUR SPOUSE'S DATE OF BIRTH (MM/DD/YYYY)

2. MARITAL STATUS (Check one box)

☐ (1) MARRIED-LIVING WITH SPOUSE (You are legally married and live with your spouse or you live apart only for medical reasons.)

☐ (2) MARRIED-NOT LIVING WITH SPOUSE (You are legally married but estranged from your spouse.)

Show the amount you contributed to your spouse's support during the last 12 months (in dollars) _____

If you separated within the last 12 months, show the date of separation (MM/DD/YYYY) _____

☐ (3) NOT MARRIED (You have never married or are now divorced or widowed.)

If your marriage ended within the last 12 months, show the date of divorce or death (MM/DD/YYYY) _____

3A. NUMBER OF UNMARRIED DEPENDENT CHILDREN (See Paragraph 1 of the EVR Instructions)

IN YOUR CUSTODY

NOT IN YOUR CUSTODY

3B. AMOUNT CONTRIBUTED DURING PAST 12 MONTHS TO CHILDREN NOT IN YOUR CUSTODY (in dollars)

4A. ARE YOU A PATIENT IN A NURSING HOME? (If "YES," Complete Items 4B thru 4D. If "NO," go to Item 5)

☐ YES

☐ NO

4B. SHOW THE DATE YOU ENTERED THE NURSING HOME (MM/DD/YYYY)

4C. ENTER THE NAME, COMPLETE ADDRESS, AND TELEPHONE NUMBER OF THE NURSING HOME (Please include ZIP Code)

4D. DOES MEDICAID COVER ALL OR PART OF YOUR NURSING HOME FEES?

☐ YES

☐ NO

5. DID YOU RECEIVE WAGES OR WERE YOU EMPLOYED AT ANY TIME DURING THE PAST 12 MONTHS?

☐ YES

☐ NO

6. DO YOU RECEIVE ANY OTHER VA BENEFITS AS A VETERAN, PARENT, OR SURVIVING SPOUSE?

☐ YES (If you checked "YES," write in the VA File number of the other benefit) _____

☐ NO

REPORT OF INCOME AND NET WORTH

7A. MONTHLY INCOME *(Read Paragraphs 2 and 3 of the EVR Instructions)*

NOTE: If no income or net worth was received from a particular source, write "0" or "none." DO NOT LEAVE ANY ITEMS BLANK. Exception: Report your spouse's income only if you receive Section 306 Pension.

SOURCE	GROSS MONTHLY AMOUNTS <i>(in dollars)</i>	
	VETERAN	SPOUSE - SECTION 306 ONLY
SOCIAL SECURITY		
U.S. CIVIL SERVICE		
U.S. RAILROAD RETIREMENT		
MILITARY RETIREMENT		
BLACK LUNG BENEFITS		
SUPPLEMENTAL SECURITY INCOME (SSI)/PUBLIC ASSISTANCE		
OTHER MONTHLY INCOME <i>(Show Source)</i>		

7B. ANNUAL INCOME *(Read Paragraphs 2 and 4 of the EVR Instructions)*

NOTE: If no income or net worth was received from a particular source, write "0" or "none." DO NOT LEAVE ANY ITEMS BLANK. Exception: Report your spouse's income only if you receive Section 306 Pension.

SOURCE	LAST YEAR <i>(in dollars)</i>		THIS YEAR <i>(in dollars)</i>	
	VETERAN	SPOUSE - Sec. 306 Only	VETERAN	SPOUSE - Sec. 306 Only
GROSS WAGES FROM ALL EMPLOYMENT				
TOTAL INTEREST AND DIVIDENDS				
ALL OTHER <i>(Show Source)</i>				
ALL OTHER <i>(Show Source)</i>				

7C. DID ANY INCOME CHANGE *(Increase/Decrease)* DURING THE LAST 12 MONTHS? *(Answer "NO" if there were no income changes or if the only change was a Social Security/VA cost-of-living adjustment. Answer "YES" if there were any other income changes or if you received any NEW source of income or any ONE-TIME income)*

☐ YES *(If "YES," complete Items 7D, through 7F.)*

☐ NO *(If "NO," go to Item 7G.)*

7D. WHAT INCOME CHANGED? <i>(Show what income changed; for example, wages, city pension, etc.)</i>	7E. WHEN DID THE INCOME CHANGE? <i>(Show the dates you received any new income or the date income changed (MM/DD/YYYY))</i>	7F. HOW DID INCOME CHANGE? <i>(Explain what happened; for example, quit work, got raise, received inheritance)</i>

7G. VETERAN'S NET WORTH *(Read Paragraph 5 of the EVR Instructions)*

NOTE: Complete only if you receive Section 306 Pension. Skip to Item 9A if you receive Old Law Pension.

SOURCE	VETERAN <i>(in dollars)</i>	SURVIVING SPOUSE <i>(in dollars)</i>
CASH/NON-INTEREST BEARING BANK ACCOUNTS		
INTEREST BEARING BANK ACCOUNTS		
IRAs, KEOGH PLANS, ETC.		
STOCKS, BONDS, MUTUAL FUNDS, ETC.		
REAL PROPERTY <i>(Not your home)</i>		
ALL OTHER PROPERTY		

8. FAMILY MEDICAL EXPENSES

NOTE: Skip to Item 9A if you receive Old Law Pension.

If Paragraph 6 of the EVR Instructions indicates that you should report medical expenses, use VA Form 21P-8416, Medical Expense Report, to report your medical expenses.

9A. SIGNATURE OF CLAIMANT, CUSTODIAN OR GUARDIAN <i>(Read Paragraph 9 of the EVR Instructions before signing)</i>	9B. DATE <i>(MM/DD/YYYY)</i>

10. TELEPHONE NUMBER <i>(Include Area Code)</i>	DAYTIME	EVENING

PENALTY: The law provides severe penalties which include fine or imprisonment or both, for the willful submission of any statement or evidence of a material fact, knowing it is false, or fraudulent acceptance of any payment to which you are not entitled.