

7000-1 (CFO)

28 November 2007

Distribution List

THE MILITARY FAMILIES FUND

References: A. CANFORGEN 130/07  
301700Z Jul 07  
B. Military Families Fund Terms of  
Reference

1. As outlined at references A and B, Base/Wing Commanders have been delegated the authority to use the Military Families Fund (MFF). The intent of this letter is to provide you with the necessary information so that you may make the appropriate decision regarding the use of the fund.
2. The following documents have been enclosed to assist in this endeavour:
  - a. Base/Wing Commander Beneficiary Checklist & Recommendation Form;
  - b. Instructions on the completion of the Base/Wing Commander Beneficiary Checklist & Recommendation Form;
  - c. MFF Case Decision Trees;
  - d. Payment Options;
  - e. Important Points for BMO Pre-paid Mastercard Cardholders;

7000-1 (CSF)

Le 28 novembre 2007

Liste de distribution

FONDS POUR LES FAMILLES DES  
MILITAIRES

Références : A. CANFORGEN 130/07  
301700Z Juillet 07  
B. Mandat du Fonds pour les familles des  
militaires

1. Tel qu'il est précisé dans les documents ci-dessus, les pouvoirs relatifs à l'utilisation des fonds provenant du Fonds pour les familles des militaires (FFM) ont été conférés aux commandants des bases et des escadres. Le but de cette lettre est de vous fournir l'information nécessaire pour vous aider à prendre des décisions judicieuses quant à l'utilisation du FFM.
2. Vous trouverez ci-joint les documents suivants pour vous appuyer :
  - a. Liste de vérification et formulaire de recommandation de bénéficiaire à l'intention des commandants des bases et escadres;
  - b. Consignes pour remplir la liste de vérification et le formulaire de recommandation de bénéficiaire à l'intention des commandants des bases et escadres;
  - c. Schémas de décision – cas FFM;
  - d. Options de paiement;
  - e. Points importants à l'intention du détenteur d'une carte prépayée MasterCard de la BMO;

- f. Cheque Request; and
  - g. Pre-paid Mastercards (PIN to be sent separately).
3. Action addressees are encouraged to liaise with their local SISIP FS Financial Counselors.
4. Any questions regarding this matter may be addressed to Sandy Gauthier, Military Families Fund Manager, 613-992-4560.

- f. Demande de chèque;
  - g. Cartes prépayées MasterCard (les NIP seront envoyés sous pli séparé).
3. Les destinataires pour action sont invités à communiquer avec les conseillers financiers des SF RARM de leur localité.
4. Toute question à ce sujet peut être dirigée à Sandy Gauthier, gestionnaire du Fonds pour les familles des militaires, au 613-992-4560.

Le Chef de la direction,  
Brigadier-général



D.E. Martin  
Brigadier-General  
Chief Executive Officer

Enclosures: 7

Distribution List

Liste de distribution

Action

Action

Base/Wing/Unit Commanders

Commandants des bases/escadres/unités

Info

Info

CAS  
CLS  
CMS  
Exec VP PSP  
President CANEX  
President SISIP FS  
CFO CFPSA  
CEFCOM  
CANOSCOM  
CANSOFCOM  
Canada COM

CEMFA  
CEMAT  
CEMFM  
VP Exéc PSP  
Président CANEX  
Président SF RARM  
CSF ASPFC  
COMFEC  
COMSOCAN  
COMFOSCAN  
COM Canada

**SCHEDULE "A"**

***PROTECTED "B" PERSONAL INFORMATION WHEN COMPLETED***

**BASE/WING COMMANDER BENEFICIARY CHECKLIST &  
RECOMMENDATION FORM**

Name of Beneficiary: \_\_\_\_\_

Address of Beneficiary: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Name of CF Member: \_\_\_\_\_

Relationship with CF Member: \_\_\_\_\_

Type of Assistance: Grant  Interest-Free Loan (not available at Base/Wing)

Amount of Assistance Requested: \_\_\_\_\_

Is the need urgent: Yes  No

Is assistance available from other sources (eg.CFPAF or Public Funds): Yes  No

Is the Beneficiary able to reimburse the MFF: Yes  No

Is assistance requested as a result of injury, disability or death of CF Member: Yes  No

If Yes, was injury, disability or death a result of duty: Yes  No

Is there a requirement for other support or counseling? Yes  No

Has the file been reviewed by the Financial Counselor? Yes  No

Explain reason for request for assistance:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Funds to pay for: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Recommended/Approved Yes  No

\_\_\_\_\_  
BASE/WING COMMANDER

DATED AT                      THIS              DAY OF                      200\_\_.

**SCHEDULE "B"**

***PROTECTED "B" PERSONAL INFORMATION WHEN COMPLETED***

**VERIFICATION AND CONSENT FORM**

I \_\_\_\_\_ of the \_\_\_\_\_ of \_\_\_\_\_ in the Province of \_\_\_\_\_ HEREBY VERIFY that all of the information I have provided with respect to my request for financial assistance from the Military Families Fund, is true.

This will also confirm that I am aware that the information being collected from me for this purpose will be collected, used and disclosed for the purposes of assessing my request and for all other purposes associated with the administration of the Military Families Fund and that, SUBJECT TO MY SPECIFIC CONSENT BELOW, no other use or disclosure of this information will occur without my consent, other than pursuant to the provisions of the *Access to Information Act* and the *Privacy Act*.

\_\_\_\_\_  
BENEFICIARY

DATED AT                      THIS                      DAY OF                      , 200\_\_.

---

**SPECIFIC CONSENT**

I \_\_\_\_\_ of the \_\_\_\_\_ of \_\_\_\_\_ in the Province of \_\_\_\_\_ HEREBY CONSENT / DO NOT CONSENT to the disclosure of the following information by the CDS, or others acting on behalf of the CDS:

1. My name as a Beneficiary of the Military Families Fund,
2. The purpose of my request for financial assistance, and
3. The amount and nature of the financial assistance I have received.

For such purposes as the CDS, or others acting on behalf of the CDS, in their absolute discretion, may consider to be of benefit to the Military Families Fund, including obtaining contributions thereto.

\_\_\_\_\_  
BENEFICIARY

DATED AT                      THIS                      DAY OF                      , 200\_\_.

Instructions on the Completion of the Base/Wing Commander  
Beneficiary Checklist and Recommendation Form

Schedule "A"

Name of Beneficiary: According to the Terms of Reference, a Beneficiary is defined as any individual related by blood or law to a serving or former CF member, or to a member of that individual's immediate family who meets the criteria for financial assistance. A beneficiary may include a spouse, parent, grandparent, guardian, child, grandchild, brother, sister, mother-in-law, father-in-law, brother-in-law, sister-in-law, aunt, uncle, niece or nephew. It should be noted that an individual who is not related by blood or law to a CF member may be considered a Beneficiary of the MFF if the relationship between the CF member and the individual is or has been of significance to the CF member, in the opinion of the member's Base/Wing Commander, and the CF member has been killed, disabled or injured while serving as a member of Her Majesty's Forces.

Telephone Number: Indicate the preferred contact number (home, work or cell).

Type of Assistance: In accordance with the Terms of Reference, there are two methods of financial assistance available: an interest-free loan or a grant. Only the grant is available at the Base/Wing level. In determining the appropriate type of assistance, consideration must be given to the following:

- a. the urgency of the need – Is the family in immediate distress? Are the basic needs of food, clothing and shelter being met?
- b. availability of financial assistance from other sources, including public funding – Is funding available through Veterans Affairs? Is funding available through CFPAF? Has the beneficiary attempted to try to obtain assistance from other sources such as a bank or relative? Can public funding be obtained to satisfy this requirement? (Note: if the purpose of the request for financial assistance is related to the injury or death of a CF member, particular efforts must be made in advance to determine whether public funding is available to cover the financial needs);
- c. the reasonable ability of the individual to reimburse the MFF – Is the individual able to reimburse the MFF in the short term? When?
- d. the cause of the financial need – What is the reason for the reduction in family income? Has it been ongoing? Is it the result of an unforeseen circumstance? Will financial assistance resolve the

immediate situation? What steps have been taken to rectify the situation? What is the likelihood of a similar occurrence in the future?

- e. the need for third party professional assistance, support or counseling;
- f. the need for financial counseling – Has the family been seen by the Base/Wing/Station SISIP Financial Counselor? Could the family benefit by seeing a SISIP Financial Counselor?

Reason for the request for assistance - Some examples may include medical expenses, utility arrears, etc.

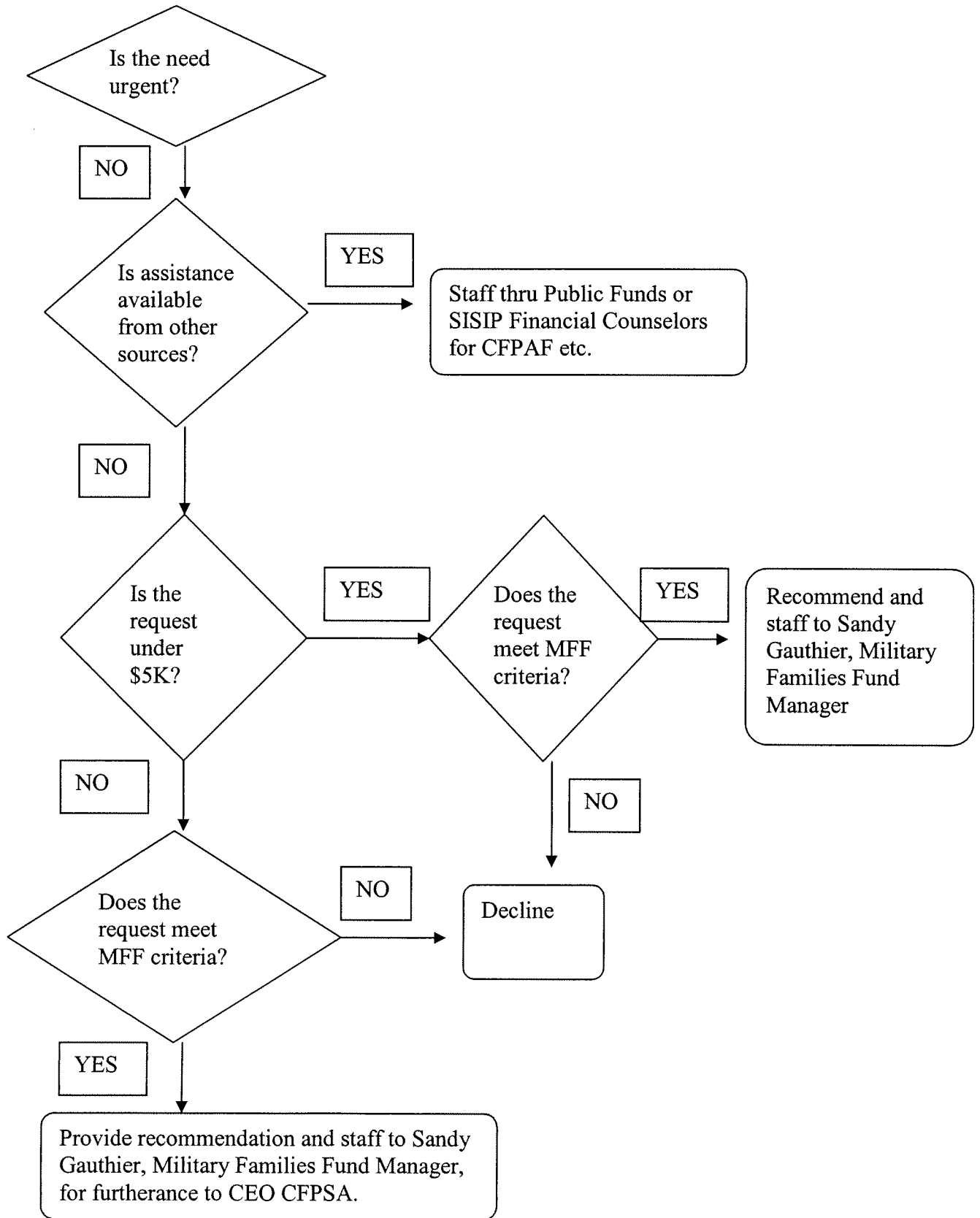
Amount of Assistance Requested – In accordance with the Terms of Reference, the Base/Wing Commander may approve up to and including \$5000 per beneficiary. Any requests in excess of this amount must be staffed to the Military Families Fund Manager for furtherance to the CEO CFPSA for approval.

Staffing of completed paperwork – Once completed, a copy of Schedules A and B is to be forwarded to the Military Families Fund Manager, c/o CFPSA, 4210 Labelle Street, Ottawa, Ontario, K1A 0K2. Any questions regarding the completion of the paperwork may be directed the Military Families Fund Manager at 613-992-4560.

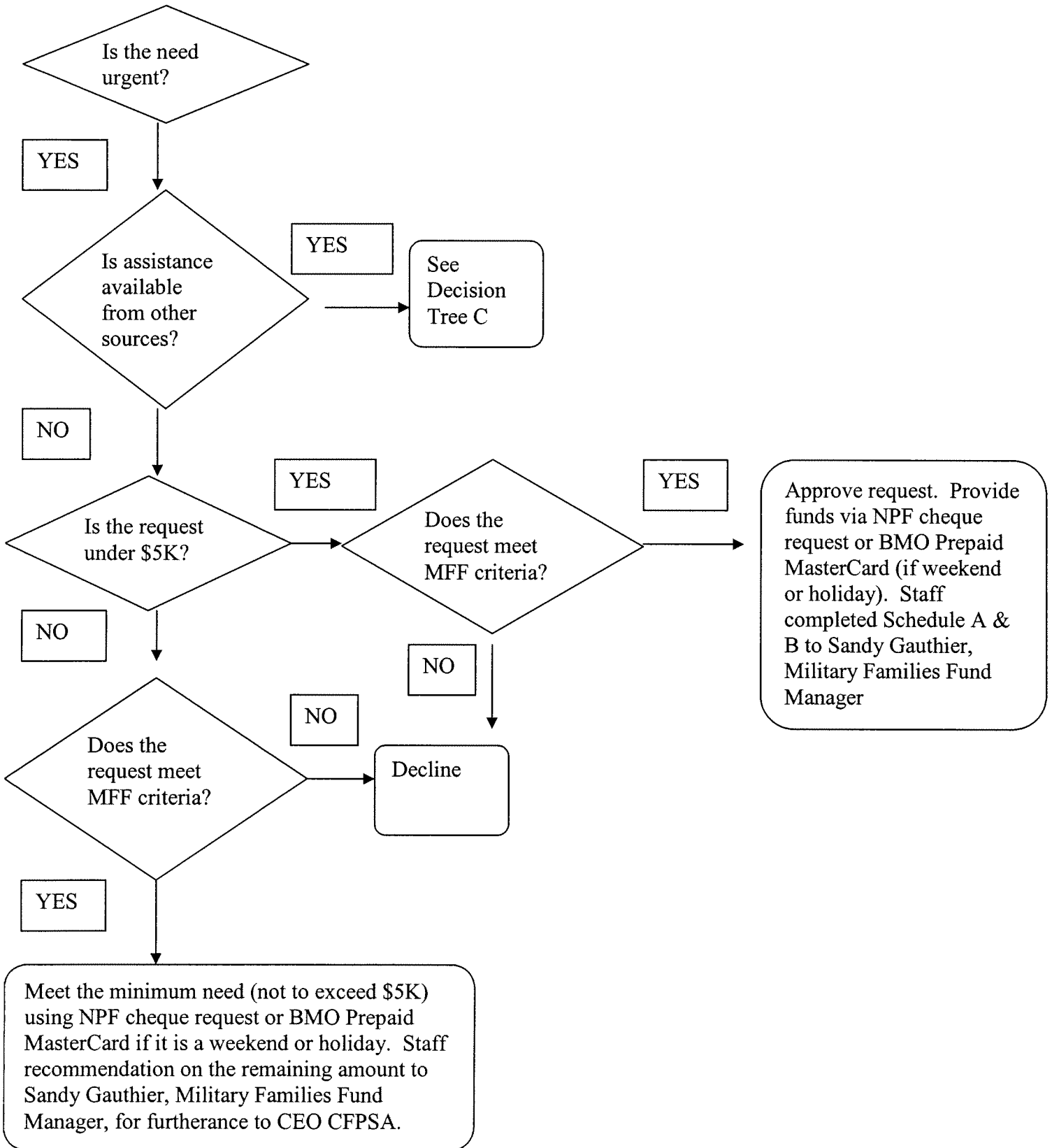
#### Schedule “B”

When completing the first line of the verification and consent form as well as the specific consent, the second blank requires the word “City” or “Town” and the third blank requires the name of the city or town.

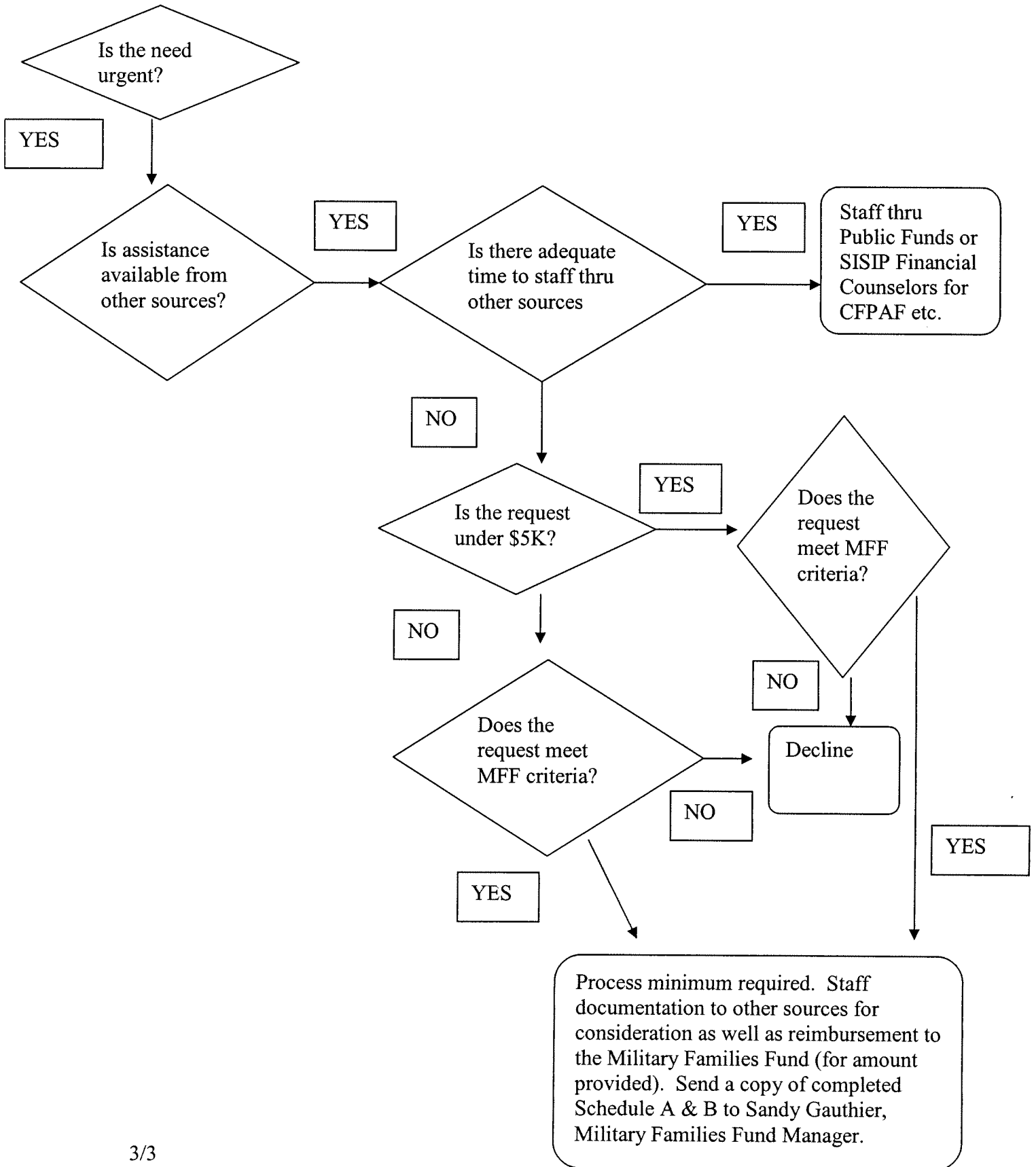
MFF Case Decision Tree A Non-Urgent Need



MFF Case Decision Tree B Urgent Need



MFF Case Decision Tree C Urgent Need  
and Assistance Available from Non MFF Resource



## Payment Options

### Limitations

In accordance with the Terms of Reference, Base/Wing Commanders may approve up to and including \$5,000.00 per beneficiary from the fund for Grants only. Requests for amounts in excess of this amount must be staffed to the Military Families Fund Manager for furtherance to the CEO, CFPSA for approval.

In instances where a Base/Wing Commander has recommended payment from the MFF and it is apparent to the CEO, CFPSA that payment could be made from either the Canadian Forces Personnel Assistance Fund (CFPAF) or from DND/CF public funds; the CFO, CFPSA has the full authority to advise the Base/Wing Commander and to either direct that payment be made from CFPAF or recommend that payment be made from public funds.

In instances where a payment has been made from the MFF and it is determined that the payment could have been made from either CFPAF or DND/CF public funds; the CFO, CFPSA has full authority to advise the Base/Wing Commander and to either reimburse the MFF, or to seek reimbursement from DND/CF public funds, or CFPAF.

### Methods of Payment

There are two methods of payment.

1. Cheque Request to Local NPF Accounting Office – This is the preferred choice and will be used during normal working hours. A request is forwarded to the local NPF Accounting Office for a cheque to be raised. A copy of the Cheque Request Form is provided at Annex A. Copies of receipts should be retained at the Base. Cheques can be produced within a very short time period. Clearly indicate the urgency to the Base Manager/Supervisor upon delivery of the request.

2. BMO Prepaid MasterCards – This option should be utilized only during silent hours or on weekends and holidays, when the first option is not practical or available. Details pertaining to this option are as follows:

- a. Each Base/Wing/Station Commander will be issued 4 pre-activated cards with sealed PIN: 2 with a value of five hundred (\$500), 1 with a value of thousand (\$1,000) and 1 with a value of two thousand (\$2,000). These cards will be pre-loaded to the designated amount and ready to be used, therefore they need to be treated as cash and stored in a secure environment;
- b. When a card is issued, the Base OPI will send an e-mail to the Card Administrator at \*BANKCARDMFF@CFPSA.COM or call 1-866-525-7959 with the following details: the serial number of the card issued, the name

of the cardholder, and the amount the cardholder is authorized to spend. Upon receipt of the e-mail or phone call, a replacement card will be mailed to the Base in question. In the event the amount authorized is less than the amount of the card issued, the Card Administrator will take the necessary action to amend the limit;

- c. All cards are pre-activated and ready to be utilized; therefore the Base OPI (as designated by the Base/Wing/Station Commander) is to notify the Card Administrator during normal working hours Eastern standard time prior to 16:30hrs daily for any changes to the initial card amount limit.
- d. Transactions will be monitored for misuse. Base/Wing/Station Commanders may request a detailed transaction report from the Card Administrator;
- e. Cash advances in the amount of \$100 per card will be permitted;
- f. Cardholders must sign the back of the card and are responsible for retaining receipts pertaining to card purchases;
- g. If a cardholder would like to request another sales slip, then there will be a replacement fee of \$2.00;
- h. Cards expiry will be set to 12 months from the date of issue to the Base/Wing/Station;
- i. Cardholders are to be notified that they must annotate and safe keep the card name and number indicated on the card for reference purposes;
- j. In the case where the card is lost, compromised or tampered with, the cardholder is to contact the BMO customer service at 1-800-263-2663 and provide the card name and number. BMO will not have any details on the current cardholder; and
- k. The following information should also be readily available:
  - I. Card Administrator Address: National NPF Office  
Garrison Valcartier, bldg 500, PO 1000, Succ Forces,  
Courcelette, Qc  
Administrators: Mrs Line Robitaille or Mrs Elisabeth  
Lefebvre.  
Phone Numbers: 1-866-525-7959 or 418-844-5000 ext  
6449 or CSN 666-6449;  
EMAIL: [\\*BANKCARDMFF@CFPSA.COM](mailto:*BANKCARDMFF@CFPSA.COM)
  - II. BMO Customer services: 1-800-263-2663

## Important Points for the Cardholder regarding the BMO Prepaid Mastercard

For the purpose of this instruction, Card Administrator refers to the Garrison Valcartier NPF Office and cardholder refers to the individual who is assigned the card.

### THE PREPAID CARDS

Prepaid Cards are not credit cards as only transactions up to the amount of the funds pre-loaded on the Prepaid Card will be honoured by the Bank. Prepaid Cards can be used to purchase goods and services at any merchant that accepts MasterCard cards.

- The Card Administrator will be notified by the Bank of any unauthorized payments or loading of Prepaid Cards by the Cardholder and the Bank may cancel any Prepaid Cards for unauthorized loading or payment.
- Cardholders will be issued a personal identification number (**PIN**) enabling them to use the Prepaid Card at automated teller machines (**ATMs**) accessible with the Prepaid Card to obtain Cash Withdrawals.  
**Cardholders are not to disclose the PIN to any other person.** Cash Withdrawals are limited to \$100 per card.

### CHARGES

- The Cardholder may use the Prepaid Card to (a) charge the price of goods or services obtained from a merchant or supplier honouring the Card (**Purchase**), or (b) cash withdrawals obtained through use of the Prepaid Card either directly from the Bank, including through use of ATMs, or through other financial institutions honouring the Card or through purchases of money orders, traveller cheques, or similar items (**Cash Withdrawal**). Any such use of a Prepaid Card which results in a charge to the Prepaid Card, whether or not the Prepaid Card was presented to a merchant or supplier (such as mail or telephone order purchases) or the Cardholder's signature was obtained or by use of a PIN, is herein called a "**Transaction**".
- The Bank will maintain records for each Prepaid Card (**Card Account**). The Bank shall record all Transactions with respect to each Prepaid Card, as well as all fees, service charges, credits and adjustments relating to such Prepaid Card or its use on the Card Account maintained for such Prepaid Card. All Transactions, fees and service charges recorded on individual Card Accounts, shall constitute a charge to the Prepaid Card (**Charge**).

- Any Transaction made in a currency other than the currency of the Prepaid Card will be charged to the Card Account in Canadian dollars.

#### STATEMENTS, PAYMENTS AND INTEREST

- Monthly card statements will not be provided. Cardholders will be able to obtain Card Account transaction information by contacting the Card Administrator at 1-866-525-7959.
- Cardholders will be responsible for reviewing Card Account transactions at least once every 30 days. Any errors or omissions with regard to any Charge to the Card Account must be identified within thirty (30) days after the date of the Charge.
- Cardholders are responsible for retaining all receipts pertaining to the use of the card.

#### CUSTOMER LIABILITY

- Cardholders are only authorized to spend up to the amount authorized on the card. Should a cardholder exceed the limit of the card, the cardholder will be responsible for reimbursing the CFCF. The only exception is in the case of Cardholder fraud.
- If a Prepaid Card is used without the Cardholder's authorization, the CFCF will not be liable for any unauthorized use of the Prepaid Card if the Cardholder used reasonable care to safe the Prepaid Card against loss or theft; there has not been more than 1 unauthorized use of the Prepaid Card in the last 12 months; and the Card Account is in good standing.
- If those criteria are not met, the CFCF's maximum liability for an unauthorized use of the Prepaid Card is \$50. However, if the Prepaid Card and PIN are used together without the Cardholder's authorization, the CFCF's maximum liability will be \$500 if the Cardholder willingly disclosed the PIN to another person; didn't keep the PIN separate from the Prepaid Card; or didn't notify the Bank by telephone within 24 hours of learning that the Prepaid Card was lost or stolen or that the confidentiality of the PIN had been compromised. This liability will be shifted to the cardholder with the card limit being reduced by the amount of the liability.

### Lost or Stolen Card Procedure (24/7)

The Card Administrator and the Cardholder will notify the Bank as soon as it is aware that a Card is lost, stolen or missing and, if required, request a new Card, by phoning Customer Services at:

Toll Free: 1-800-263-2263

Prepaid cards are identified by the Base and an associated number, for example CFB Edmonton 1. When identifying the lost or stolen card it is imperative that the associated number be stated. Upon such notification, the Bank will cancel the missing Card.

### Disputed Charge Procedure (Monday – Friday)

The Cardholder will notify the Card Administrator of any vendor/customer charge disputes by phoning.

Toll Free: 1-866-525-7959



### Listing of CE Codes

CE Code	Description
102	Homecare
142	Groceries
145	Food/Catering
169	Educational Programs
191	Refreshments
203	Medical
205	Token of Sympathy
210	Utilities
217	Lodging
229	Hospitality
274	CFPAF Loan
278	Meals
280	Travel
288	Clothing
290	Repairs
291	Telephone
500	Memorials
900	Legal