

LIZA'S LIFELINE
FINANCIAL ASSISTANCE REQUEST FORM

This form must be completed and submitted by a Victim Advocate or an approved Agency Representative only (see list below).

Note: Incomplete forms may slow down the approval process. Please answer all questions completely.

Today's Date: _____

Requested By: _____

Title: _____

Agency Name: _____

Address: _____

Phone #: _____

Victim's Name: _____

Crime/Incident (please provide a brief description and attach a police report or other supporting documentation):

Detail of Financial Assistance Requested* (provide specifics as to \$ amount and how it will be used): _____

Is victim currently with abuser?* Y or N

Is victim planning to return to abuser?* Y or N

If assistance is for a past due bill, please provide a copy of most current bill and give details as to how assistance supports our mission of keeping victims out of harm's way:

***Criteria for Victim Assistance**

- a. The victim must be in eminent danger of abuse by their intimate partner abuser or
- b. The victim must be in a situation where they require the resources to immediately escape the physical danger of their abuser or
- c. The victim is in need of assistance to prevent them from having to return to a violent living environment (i.e. rent deposit, utility bill).
- d. The request must be from a victim advocate and/or approved domestic violence related agency working with the named victim.

Current Partner Agencies:

Berkeley County Sheriff's Office	Mt. Pleasant Police Department
Charleston City Police Department	MUSC Crime Victims Center
Charleston County Sheriff's Office	My Sister's House
Coastal Catholic Charities	Ninth Judicial Solicitor's Office
Dee Norton Child Advocacy Center	North Charleston Police Department
Dorchester County Sheriff's Office	Tri-County S.P.E.A.K.S.
ORIGIN (Family Services)	St. George Police Department
Folly Beach Police Department	Summerville Police Department
Goose Creek Police Department	Sullivan's Island Police Department
Hanahan Police Department	U.S. DOJ/U.S. Attorney's Office
Isle of Palms Police Department	Veteran's Affairs Hospital
The Hive Community Circle	The Formation Project
	Moncks Corner Police Department

If your agency is not on this list and would like to be included, please submit information about your agency along with this Financial Request Form to lizaslifeline@gmail.com

LIZA'S LIFELINE OF SOUTH CAROLINA, INC.
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