

# Application for Westmoreland Tornado Relief

**Full Name:**

**Proof of Address:** (City can be a resource for this information.)

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**Email(s):**

**Insurance Information:** (Describe the type(s) of insurance you have.)

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**Date of Birth:**

**Insurance Deductible:** \_\_\_\_\_

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**Describe other funds received for your needs and their source:** (family gifts, crowd funding, etc.)

**Phone Numbers:**

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**The Westmoreland  
Tornado Relief Fund**  
of the Caring Community  
Foundation  
ccfks.org

**Describe Property Losses:**

Describe your personal losses caused by the tornado; specify dwelling, vehicle, personal expenses incurred (hotel, etc.)

Please return to:

**City Clerk**  
**The City of Westmoreland, KS**  
**202 Main St.**  
**Westmoreland, KS 66549**  
by 5:00pm  
Friday, May 17th

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**Signature:**

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All Claims must reflect personal needs that are unmet by insurance and/or other forms of compensation, and claimed damage need to be a direct result of the tornado that struck Westmoreland on April 30, 2024. All Claims are subject to review by the City of Westmoreland, the Executive Committee of the Caring Community Foundation, and law enforcement authorities for qualifications and potential illegitimate or fraudulent claims. Application is for Westmoreland addresses only. There is no guarantee of funding.