

505 East Perkins Avenue Sandusky, Ohio 44870 www.CancerResources.org Phone: (419) 626-4548 Fax: (419) 502-0222 CancerServicesPatients@gmail.com

Financial Assistance Checklist

Program Overview:

Funds may be used for daily-living costs such as rent, utilities, food, transportation, childcare, etc.

Eligibility Criteria:

- Currently be in treatment for cancer diagnosis.
- Reside in Erie, Huron or Ottawa county.
- Have a current annual household income at or below 300% Federal Poverty Level.
- Application submission does not assure assistance will be granted.

Instructions for Application:

- 1. Complete the application.
- 2. Your application must include copies of any of the following documents that apply to you.
- 3. Please attach copies, not originals, as Cancer Services cannot return any documents sent with the application.

Required documentation:

- If making wages, must provide ONE month of paystubs or a statement from employer.
- If receiving income other than wages, please provide one of the following.
 - o Provide ONE month of bank statements
 - Social Security benefit letter
 - Social Security 1099
 - o Copy of Social Security check
- If a patient is receiving no income, please provide a letter stating the reason for no income.
- Obtain letter from applicant's medical provider/social worker confirming current stage of cancer and applicant's current treatment plan. Letter must be on official letterhead and dated.

Applications may be emailed at CancerServicesPatients@gmail.com or dropped off at 505 E. Perkins Ave. Sandusky, OH 44870