

Cares for Cancer, Inc.
PO Box 124
Hankinson, ND 58041



Granting Committee
caresforcancer@yahoo.com
(701) 403-9509

Individual Gift Funding - Guidelines

Mission Statement

Making a difference by helping others meet their medical needs with compassion because we CARE.

What is Individual Gift Funding?

Individual Gift Funding is a program established in October 2011 by Cares for Cancer, Inc. to aid local individuals who are struggling from medical expenses. Funding for this purpose is obtained through generous donations from the surrounding communities, businesses, individuals, and other organizations as well as our annual Cares for Cancer benefit.

After the 15th of each month, the Individual Gift Funding committee reviews the pool of qualified applications and using a voting system, selects the most deserving applicants to receive the monetary grant. Reviewing the applications involves a scoring process. Several factors are taken in consideration during this process such as length of illness, whether or not the individual has insurance, or if they receive other types of financial assistance for medical needs, etc. Cares for Cancer, Inc. will provide funding in the amount of \$1,000 per person every three months. The total amount of funding for a particular month will not exceed \$10,000 or ten applicants. Individuals will need to submit receipts up to \$1,000 to obtain the full gift amount. The applicant will be notified on a monthly basis if they have or have not received the gift funding, and if chosen, a check for the set gift amount will be mailed to the applicant. Acceptance/Denial letters are sent out by the 1st of the month following the submitted application.

If someone is applying for a deceased individual, they may apply for a one-time grant if within 30 days of the date of death. The person applying must be a legal spouse or legal representative.

Please note, meeting all of the criteria does not guarantee funding. All gift funding decisions are at the sole discretion of the granting committee. Should a large number of applications be received for a particular granting period preference may be given to first time applicants and those individuals with acute versus chronic conditions.

Who is eligible to obtain funding?

Any individual who is currently battling ANY medical illness or condition is eligible to obtain funding. However certain documentation must be provided, such as:

- Documentation from a medical professional verifying medical illness or condition, dated within the last 90 days.
- Proof of expenses (totaling the amount requested) must be verified via one or more of the following:
 - o Medical Explanation of Benefits (EOB)
 - o Mileage Log (corresponding paperwork from the physician's office documenting your appointment must accompany your mileage request). Mileage will be reimbursed at the current IRS rate.
 - o Prescription Drug Receipts (Print out from pharmacy must accompany the prescription bill)
 - o All other medical expenses (ex. Physical therapy, dental work, medical devices) must have a note from a physician documenting the need from these services/appliances.
- Individual must be a resident in Richland County, ND or have an address within 40-mile radius of Hankinson, ND
- Any individual in which a medical benefit is being held on behalf of within Richland County, ND or have an address within 40-mile radius of Hankinson, ND (must provide copy of benefit flyer)

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How do I apply for gift funding?

If the above criteria are met, an eligible first-time applicant may complete an application and submit their proof of medical expenses and documented diagnosis. Applications can be found on our website, www.cares4cancerinc.org. If you would like an application mailed to you, please email caresforcancer@yahoo.com. All applications need to be received by the 15th of each month. Letters describing acceptance/denial of benefits will be sent out by the 1st of the month following application submission.

How do I re-apply for gift funding?

If you are not selected to receive funding for a particular month, you may re-apply each month. The information needing to be received from the applicant would be the same as a first-time applicant.

If an individual is chosen to receive the gift funding for a particular month, he/she may not apply again for another 90 days after date of acceptance. If the applicant chooses to reapply after 90 days, he/she may do so by providing the following:

- A new set of documentation of medical expenses totaling the amount requested up to \$1,000.00.
- Updated documentation from a medical professional verifying medical illness or condition, dated within the last 90 days.

*Note: There is a maximum amount of gift funding that one individual may receive. Each gift funding recipient may only receive \$5,000 over a five-year period.

Questions or Concerns? Questions may also be directed to the caresforcancer@yahoo.com email address or calling Christy Koehler at (701) 403-9509.