



MommiesWithCancer is a non-profit, 501(c3) organization that provides financial assistance to women who are economically vulnerable as a result of cancer.

Wishing Well gifts that are eligible for funding include, but are not limited to:

- Rent/mortgage
- Utilities
- Childcare
- Groceries
- Medical co-pays
- Medication
- Transportation
- Counseling
- Wigs/prostheses
- Transportation for a loved one for a special event

MommiesWithCancer also offers free ongoing support and resources to any cancer survivor. MommiesWithCancer holds monthly, free support group meetings in Northridge that offer a safe stage for communication and solidarity. Free childcare is available at these meetings. Please visit our website [www.MommiesWithCancer.net](http://www.MommiesWithCancer.net) or [www.MommiesWithCancer.org](http://www.MommiesWithCancer.org) for more information.

Sincerely,

*Marta Blum & Anastasia Alton*

Co- Founders, [MommiesWithCancer.org](http://MommiesWithCancer.org)  
Tax ID 45-0960132



## Wishing Well Grant Application

To be considered for a Wishing Well gift from MommiesWithCancer, you must be a mother. Please complete the application and specify which type of grant you are requesting. Please including the following documentation with your submission:

1. A letter from your physician, on letterhead, verifying your diagnosis/medical condition.
2. One (1) of the following documents:
  - Current payroll stub
  - Previous year's Federal tax return
3. Copies of bills or any other supporting documentation as related to the financial support you would like to receive.
4. Type of grant you are requesting:

Needs Grant       Wish Grant

### Definition of grants:

- Needs Grant: General living or medical expenses
- Wish Grant: Experiences

Date: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name \_\_\_\_\_ DOB \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email: \_\_\_\_\_ Preferred Contact Method: \_\_\_\_\_

Referred by: (optional) \_\_\_\_\_

Type of cancer: \_\_\_\_\_

How did you hear about MommiesWithCancer? \_\_\_\_\_

Would you be willing to write a testimonial and/or submit a picture?    \_\_\_\_\_ Yes    \_\_\_\_\_ No

(Note: Agreeing to a testimonial and/or picture will not affect your grant)

Please describe your circumstances and indicate the kind of financial support you would like to receive. Please be as specific as possible with financial amounts (attach additional pages if necessary): \_\_\_\_\_

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Applications are generally considered on a one-time basis. The amount granted is at the discretion of the MommiesWithCancer Board. Applications should be submitted via email to: [Marta@MommiesWithCancer.org](mailto:Marta@MommiesWithCancer.org) or via U.S. mail to MommiesWithCancer, c/o Marta Blum 17182 Sunburst St. Northridge, CA 91325