We Care Grants – How to Apply

We Care Grants are provided to eligible employees facing significant financial hardships from unexpected events. Examples of these types of events include family emergencies, natural disasters, serious illnesses, or injuries affecting you and/or your immediate family. We Care Grants range from $500 - $5,000, and help with expenses not covered by insurance. To ensure we help colleagues who need it most, income eligibility guidelines apply.

How do I know if I am eligible?

- You must be an active McKesson employee working 20+ hours/week or on an approved leave, including short-term disability, medical leave or paid-time off.
- Income eligibility guidelines apply (i.e. household income within 400% of the Federal Poverty Level)
- You must provide receipts or invoices for eligible expenses dated within 60 days of your application.

For more information, including a list of eligible events and expenses, please take a look at our FAQ.

Before submitting your application, please review the steps below so you are familiar with the process and timing. We also recommend you save copies of receipts/expenses prior to applying.

How does it work?

2. Apply: Complete the application.
3. Submit: Submit application and receive a confirmation email from the Emergency Assistance Foundation (EAF).
4. Review: We (EAF) review your application. If there are follow-up questions, we will contact you by email within 3 business days.
5. Award Notification: After we receive all documents, we will email you with the decision, usually within 5 business days. If your application is not approved, we will note the specific reason.
6. Grant processing:
   - If approved, expect us to follow up with you within 1-2 business days with a secure DocuSign email. The DocuSign email will ask you to provide your banking information or address for the grant check to be mailed. To reduce the risk of checks getting lost in the mail and for quicker payment, we recommend you provide your banking information if possible.
   - After you complete the DocuSign, EAF will issue an electronic fund transfer to your bank account within 1-2 days. If you opt for a check, please allow 6-8 days.
   - If payment is going to a vendor, such as mortgage company or rental agency, EAF’s email will include this information. EAF can pay vendors with a credit card or check (up to 6-8 business days for receipt). Please follow up with your vendor to confirm that they’ve received the payment.
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Go to www.mckessoncares.org to access the fund page. Here you’ll find helpful information about the fund, including FAQs with details on eligibility requirements.

Once you’re ready to start, click on the “Register” link.

The first step will be to register your account. Tip – use an email address that you can access from anywhere.

When complete, click the “Create Account” button.
We Care Grants – How to Apply

You’ll receive an email from the EAF Grant Review Team to confirm your email and complete your application. If you don’t receive the email be sure to check in your junk mail.

*If you don’t receive an email within 24 hours, please contact mckessonfoundation@mckesson.com for assistance.*

Click on the link to complete your registration. You’ll be automatically directed to start your application.

If you choose to submit your application at a later date simply return to www.mckessoncares.org, click on the **Apply** link then enter your email and password credentials to login.
We Care Grants – How to Apply

We Care Grant

Depending on your situation, we provide grants up to $5,000 to cover basic costs after a personal hardship or government-declared disaster. We know these situations are time-sensitive, so we'll get back to you as soon as we can—typically in 3-5 business days. If approved, you should receive payment within 2 weeks.

Because it’s a grant – not a loan – you never have to pay it back. But to make sure we can help those who need it most, income guidelines apply. Read the FAQs (PDF 470 KB) to find out if you qualify. If this grant feels like what you need, here’s what to do:

1. **Register** your name and email
2. **Apply** for a We Care Grant
We Care Grants – How to Apply

Application

Home » Jane Doe

Jane Doe (MTCO-1768970399)

Application Round

Please note the following:
This grant application is available only in English and French (Canada), if you select another language it will not be available.

<table>
<thead>
<tr>
<th>Task</th>
<th>Status</th>
<th>Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>McKesson Taking Care of Our Own Fund</td>
<td>INCOMPLETE</td>
<td>Start</td>
</tr>
</tbody>
</table>

Please note the following:
This Fund is available only in English and French. In order to complete this application please go to language drop-down list and select one of those available languages.

Click on the Start link to begin your application
We Care Grants – How to Apply

Read the Consent Form, then click “I agree”, then click on the Next button to continue.
Read and complete the questions, to confirm your eligibility. Click on Next when complete.

Welcome to the McKesson Taking Care of Our Own Fund Grant Application
The McKesson Taking Care of Our Own Fund was created to help employees who are facing financial hardship immediately after a qualifying disaster or an unforeseen personal hardship.

Fund Criteria
In order to meet the criteria to receive a grant, you must be able to answer “Yes” to all of the following:

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Clear</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Is your application within 180 days after the event?</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>b) Is this your 1st or 2nd application in 12 months?</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>c) Ensure that you have not received more than $10,000 from Fund in the past year?</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>d) Is the grant application being sought for the amounts between $500 - $5,000?</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>e) Do you have documentation for the Event and Expenses which provide the necessary details such as date of the expense, person responsible for bill and other details listed in the application?</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>f) Is the expense documentation current (dated within 60 days from application submission)?</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
</tbody>
</table>

Financial Assistance
Grants from the McKesson Taking Care of Our Own Fund are intended for employees who are most vulnerable to financial distress caused by a qualifying disaster or personal hardship. The size of each grant is based on the need expressed in the application, the criteria set forth, the health of the fund and the grant range. The maximum grant amount available for each incident is $5,000 and the minimum amount that can be requested is $500.

Grant Selection Process
The review and selection process is administered by the Emergency Assistance Foundation, Inc., which is a U.S. 501(c)(3) tax-exempt, public, nonprofit organization with approval specifically for Employee Hardship and Disaster Relief Funds. Applications will not be considered until they are complete. Once they are submitted the normal turnaround time is within 20 business days. Applicants can view and download their application after it is submitted. If the application is approved, the McKesson Taking Care of Our Own Fund will issue a grant according to the need determined. Whenever possible, grants are paid to vendors, rather than the individual applicant. Emergency Assistance Foundation, Inc. is committed to protecting the confidentiality and security of personal information. That Emergency Assistance Foundation, Inc. may receive in connection with the McKesson Taking Care of Our Own Fund. Emergency Assistance Foundation, Inc., will use and otherwise process personal information in accordance with and for the purposes described in the Privacy and Cookie Statement.

Are You Eligible to Apply
You must be able to answer “Yes” to question 1 and “Yes” to either question 2 or 3 of the eligibility questions below in order to be able to submit an application. Please review the McKesson Taking Care of Our Own Fund Application FAQs to make sure you qualify before you apply.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Clear</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Employed by McKesson or its affiliates on the date of the application and</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>2. Regularly scheduled to work 20 or more hours per week or</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>3. On leave with pay, including short-term disability and paid time off.</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
</tbody>
</table>
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Populate the fields with your information. Click on Next when complete.

If you need help with any of the questions on this page please email our Support Team at McKesson@EmergencyAssistanceOfFn.org

Applicant Information

Applicant Last Name (as it appears on payroll record): Doe
Applicant First Name: Jane
Email Address (confirm registration email): mckessongrabulation@mckesson.com
PeopleSoft ID #: 123456
Business Units: Corporate

Phone number to contact you: Select an option and enter your contact number, including all country and/or region codes for non-US numbers.

☐ US (xxx-xxx-xxxx) 123-456-7890
☐ Outside US/Canada

All grant applications are assumed to be in U.S. Dollars.
If the Expenses and/or Bills are not in U.S. Dollars then select a currency in the drop-down box below.

☐ US Dollar

Do you live in the United States?

☐ Yes ☐ No

Home Address:
Street Address / Apt:
City:
State:
Zip Code:

Work Address:
Street Address / Apt:
City:
State:
Zip Code:

Are you able to receive mail at the home address listed above?

☐ Yes ☐ No

Marital status:
☐ Single ☐ Divorced / separated
☐ Married / domestic partner

Do you have dependents in addition to your spouse or domestic partner?

☐ Yes ☐ No
Select the Qualified Event that best describes your situation, then click on Next.
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Note, the question prompts you see for the remainder of the application will be dependent on the event and expense types you select.

The following screenshots are designed to give you a general expectation of the types of questions and responses required, but each experience will vary as every applicant scenario is unique.

Depending on your event type, you’ll be asked to indicate which forms of supporting documentation you plan to provide.

If you need help with any of the questions on this page please email our Support Team at McKesson@EmergencyAssistanceFdn.org

Natural disaster such as flood, fire, tornado, earthquake, tsunami, volcanic eruption, blizzard, drought, cyclone, hurricane, typhoon or severe storms

An unexpected or unavoidable natural disaster affecting you, your dependents, and/or property. For example, the disaster might result in evacuation, cause personal injury, and/or cause damage to your home or automobiles.

Date of the event:

2018/06/13

Documentation of the event

Please provide documentation showing proof of the event which is required by regulations before the application may be considered. Check the appropriate categories below to show the documentation that you are providing.

- News reports
- Statement from government official
- Insurance report
- Police report
- Fire report
- Emergency responder report
- Any additional supporting documentation that you think may help explain the event such as photographs, etc.
- Other (describe here)
We Care Grants – How to Apply

You may upload your documentation (this option is recommended for faster processing time) or fax your documentation after application submission.

### Necessary information

The documentation you provide must include the information listed below. Look at your documentation, and for each item listed below check “Yes” if the documentation includes this element and “No” if it doesn’t. For every “No” you will need to include additional documentation that shows that information before your application can be reviewed or a grant made.

<table>
<thead>
<tr>
<th></th>
<th>Yes, this info is included</th>
<th>No, this info is not included</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of the event</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Description of the event</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Location of the event</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Details showing you or your property were affected by the event</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

### Supporting documentation

Please provide supporting documentation of the event which must be provided before the application can be considered. For example, proof of the incident such as police, fire or insurance reports, etc. If you want, you may provide any additional supporting documentation that you think may help explain the event such as photographs, etc.

Choose how you will provide the required documentation below:

- ☐ Upload all documents into this application (fastest way to get the grant approved)
- ☐ Fax all documentation (you will be able to download a fax cover page)
- ☐ Do both: Upload and fax documentation

### Upload your documentation

You may upload 2 documents here. If you need to provide additional documentation, you will be able to upload more documents after you complete the application. After you complete the application, you will return to the home page. Click the “Supporting Documentation” link to upload additional documents prior to submitting your application for review.

Click the button below to upload a file

Choose File
No file chosen

Click the button below to upload a second file

Choose File
No file chosen
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Depending on your event type, you may be asked to provide detail on the expense categories.

Each option you select will ask for an explanation, amount and documentation, if available.

<table>
<thead>
<tr>
<th>Category</th>
<th>Details</th>
<th>Documentation Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food</td>
<td>Immediate needs only (usually applicable up to 2-4 weeks after the Event)</td>
<td>Yes/No, Amount Requested</td>
</tr>
<tr>
<td>Clothing</td>
<td>Immediate needs only (usually applicable up to 2-4 weeks after the Event)</td>
<td>Yes/No, Amount Requested</td>
</tr>
<tr>
<td>Rent - Temporary</td>
<td>Rent: temporary housing up to 30 days</td>
<td>Yes/No, Amount Requested</td>
</tr>
<tr>
<td>Repairs</td>
<td>Reasonable repairs to damaged property</td>
<td>Yes/No, Amount Requested</td>
</tr>
</tbody>
</table>
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If you are unable to complete your application the same day, you can click on the Save and Continue button at the bottom of the page at any stage in the process.

The next time you login, your application status will indicate Incomplete. Click on the Continue link to resume the application process.

Please note the following:
This grant application is available only in English and French (Canada), if you select another language it will not be available.

Please note the following:
This Fund is available only in English and French. In order to complete this application please go to language drop-down list and select one of those available languages.
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You’ll be asked to provide your financial information. Click on Next when complete.

- Note, IRS regulations require that there be a determination of need to show that grants are made for applicants that have difficulty paying expenses they face due to an unforeseen event. You may be asked to provide current pay stubs or tax returns.

Applicant Financial Information

Regulations require that there be a determination of need and to show that the grants are made for applicants that have difficulty paying the expenses that they face due to an unforeseen event. To assist with the evaluation of this grant, please complete the parts of the financial statement below that apply to you so as to show a current picture of your or your families finances. You may be asked to provide current pay stubs or tax returns.

This space is available if you wish to provide information about your need for the grant even if the information below may indicate that you do not meet the determination of need described above.

All grant applications are assumed to be in U.S. Dollars.

If the Expenses and/or Bills are not in U.S. Dollars then select a currency in the drop down box below.

US Dollar
We Care Grants – How to Apply

Do you have an unusual amount of liquid asset available, please explain why?

ANNUAL HOUSEHOLD INCOME:
Total annual GROSS household income (before taxes and/
or deductions)

MONTHLY INCOME:
Monthly household income after any taxes and deductions in an average month, before the event causing you to apply for assistance
Total monthly NET income:

MONTHLY EXPENSES:
Monthly household expenses in an average month, before the event causing you to apply for assistance
Total monthly expenses:

Are you currently seeking or have you received other financial assistance?

Yes  No

You’ll be asked to provide detail and documentation of your expenses.

- If the expenses have not yet been paid, if you are awarded a grant, that payment would go directly to the vendor.
- If you’ve already paid the bills, you’ll provide the receipts and if you are awarded a grant, that payment would go directly to you to reimburse your expenses.
We Care Grants – How to Apply

Please list the bills that you would like the fund to consider paying on your behalf. These bills must relate directly to the qualified event that has caused your financial hardship.

If you are requesting reimbursement, please list yourself, your contact information, and the amount of reimbursement you are applying for under “Vendor 1.”

For each of the vendors please upload the required documentation such as:
- Copies of current bills or invoices, or
- A letter or invoice from landlord with amount owed, or
- A copy of a gift registry from a store like Target or Wal-Mart if you are seeking help to replace essential household items not covered by insurance that were lost to the disaster, or
- Other documents to substantiate current amounts owed to vendors

**Vendor 1**

<table>
<thead>
<tr>
<th>Vendor/creditor name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Vendor/creditor address</td>
<td></td>
</tr>
<tr>
<td>Applicant account number</td>
<td></td>
</tr>
<tr>
<td>Essential need provided (rent, electricity, medical, etc.)</td>
<td></td>
</tr>
<tr>
<td>Amount requested</td>
<td></td>
</tr>
</tbody>
</table>

Vendor / Creditor phone number: Select an option and enter the contact number

- US (xxx-xxx-xxx)
- Outside of US/Canada

**Vendor 1 Documentation**

Do you need to upload or fax any vendor documentation that has not already been previously submitted?

- Yes
- No

If you have already provided receipts/documentation for Vendor 1 then no need to upload anything else. If you need to provide additional documentation upload it here (acceptable format includes PDF or JPEG)

Need to upload more for Vendor 1? Do it here:

- Choose File

Fax your documentation

Please gather all documentation and fax along with this Fax Cover Page. Please use only one fax cover page when faxing all supporting documentation. Be sure to completely enter all required information on the fax cover page. If it is not complete and the documentation cannot be matched with your application then a grant cannot be made.
We Care Grants – How to Apply

After submitting your vendor payment details and uploading any applicable support documentation, you’ll be asked if you are willing to share your story. While the Taking Care of Our Own Fund is funded by the McKesson Foundation, McKesson Corporation, and employee contributions, all applicant information is reviewed by the Emergency Assistance Foundation (EAF). Your personal information remains confidential and is not shared with McKesson unless you opt in by selecting yes. If you opt in you may be contacted by a McKesson team member to learn more about your experience.

You may also authorize EAF to provide your contact information to McKesson to assist with outreach, in the event that EAF is unable to reach you within 14 days of your application.

Read the Agreement and Authorization, check the box to acknowledge, and click on the Submit button to submit your application.
We Care Grants – How to Apply

Once submitted you’ll see a confirmation screen, acknowledging the successful completion of your application. You’ll also receive an email from EAF, confirming your submission.

You should expect to be contacted within 3 business days by an EAF team member with a status update.

You can login at any time to make changes to your application, upload additional documentation, or delete your submission.

If you have questions or concerns about your application, contact us at mckessonfoundation@mckesson.com.