



Reimburses transportation costs *for* women
undergoing treatment for cancer, living in
Clallam, Jefferson, Kitsap & Mason Counties

Website: kathleensutton.org

E-mail: help@kathleensutton.org

Client Advocates phone #: 360-328-1049

Request for Reimbursement

Thank you for your interest in the Kathleen Sutton Fund (KSF). KSF is a local non-profit organization whose funds are available to help defer transportation costs for women while undergoing treatment for cancer.

- Please Note: this form must be completed and returned to a KSF Client advocate prior to any funds being dispersed.

-Please Note: This form must be signed/verified by medical provider/social worker.

-If funds are available, KSF retroactively reimburses for approved expenses up to 180 days, for clients who have not previously received reimbursement from KSF.

Our requirements and process are simple:

1. Are you a woman receiving treatment for cancer?
2. Do you live in Kitsap, Clallam, Jefferson or Mason counties of Washington?

*There are no requirements or application for showing need of financial reimbursement.

-If you can answer yes to these 2 questions, we can start the process. A KSF Client Advocate can be reached to clarify and answer any questions, at 360-328-1049 or help@kathleensutton.org:

1. A "Request for Reimbursement" form (see attached) needs to be filled out, signed off by a provider of care: (e.g. social worker, nurse or clinician) and verify the diagnosis/treatment, along with trip information to initiate the process.
2. We realize that often clients are not aware of, or don't connect with KSF until well into their diagnosis/treatment. We can reimburse transportation expenses retroactively 6 months from confirmation and initiation of this process. Any appointments, treatments, procedures that are related to the cancer diagnosis/treatment plan of care.
3. Returning clients, who were reimbursed in past, can receive up to 3 months of retroactive funding for transportation costs to reach their cancer treatments.
4. What we will need: (See "Trip Tracker" attached)
 - Dates
 - Specific Address of site of care (for mileage calculations)
 - Brief purpose of trip (i.e. surgery, labs, oncologist appointment, infusions, etc)
 - Mode of transportation: which ferry (Bainbridge, Bremerton, Kingston), if car, driver and/or passenger tickets were purchased and if they were regular or senior/disabled.
 - If there were parking expenses, taxi's, bridge tolls or Uber's, that should be included. We do not need receipts.
 - KSF Client Advocate will calculate mileage and reimbursement



4. After receipt of information the reimbursement will be calculated, and a check will be mailed out within 7 – 10 business days of receiving the data. Periodically (preferably, monthly or every 2 months) the clients should send a trip tracker and appropriate information.
5. KSF continues reimbursement to reach treatment, as long as the client is actively being treated for cancer.
6. Upon the completion/closure of treatment KSF will cover 3 month visit/follow up

Client Name: _____ Diagnosis: _____

Address: _____ City: _____ Zip: _____

Mailing Address (if different from above):

Address: _____ City: _____ Zip: _____

Phone: _____ Email: _____

I live in the following county: ___ Clallam ___ Jefferson ___ Mason ___ Kitsap

Referring Social Worker/ Provider contact info (please print):

Name _____

Phone: _____ Email: _____

Medical Care Provider Verification: (Please Print Name): _____ Date: _____

I verify that above patient is receiving care for the diagnosis noted above. _____
(Signature of Provider)

Kathleen Sutton Fund, Client Advocates

**** PLEASE SEND COMPLETED FORM TO: help@kathleensutton.org or to address below**

For question or more information please call **360-328-1049** to reach our client advocates:

Address: PO Box 727, Kingston, WA 98346

Website: www.kathleensutton.org