



When completing the application for the Patient Financial Assistance program:

- Please be sure to complete the entire application and sign the medical release on the reverse side of the form.
- We request a letter of diagnosis from your physician. Frequently the nurses and social workers can obtain this for you.
- We request two years income information. Please include a copy of your income tax return for the years 2017, 2016 and 2015 showing your adjusted gross income; accompanying schedules and information is not needed. Generally the adjusted gross income appears on the first page of the tax return. If you have not filed taxes recently, please substitute a W-2 form, Social Security statement, disability statement, unemployment award or other verification of income.
- In the middle of application there are two questions. If you answer “yes” to either question, please include a brief description of how your income may change and of any other medical conditions you may have.

Incomplete applications cannot be processed. Please be certain you have included your diagnosis verification and your income verification with your completed application. You can mail, email or fax your completed application to the Leukemia Research Foundation.

DO NOT send reimbursement requests along with your application

If you have any questions, please feel free to contact us.

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