



## *Loving Neighbors Through Action*

Corporate Works of Mercy Foundation is a private non-profit dedicated to fulfilling the Biblical corporal works of mercy.

- † Feed the hungry and give drink to the thirsty
- † Clothe the naked and shelter the homeless
- † Visit the prisoner (ransom the captive)
- † Visit the sick and bury the dead
- † Alms for the poor

Our mission is to share God's blessings and love through action and in truth with our neighbors in need of assistance.

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## *Y-Not Assist*

### **About the Program:**

The "Y-Not Assist" program is managed by the Corporate Works of Mercy Foundation. The program's intent is to help individuals and families struggling with extreme hardships that negatively impact their lives.

Level 1 Support may be available to SRO employees, employees of our CWM sponsors, and to any community member for the following types of hardships:

- Expenses resulting from a catastrophic (chronic or terminal) medical condition
- Funeral or burial expenses for the participant's spouse, parents or dependents
- Expenses relating to the extreme damage to the participant's primary residence (i.e. fire or flood)

Level 2 Support is available ONLY to SRO employees and employees of our CWM sponsors. Hardships (outside of those identified in Level 1) will be considered on an individual basis for possible assistance.

### **The Process:**

- Complete your application and email it to [cwm@stromainoil.com](mailto:cwm@stromainoil.com) or fax it to 318-240-9561.
- Attach copies of any bills you're requesting help with, as well as supporting documents.
- Expect a call within a week to schedule an interview with 2 volunteer CWM Board Members. Please be patient with us, as we are all volunteers.
- Expect a decision from the board within 1 week of your interview. The board may approve, partially approve or deny your application based on the facts presented and the limited funds we have available.
- Expect CWM to make any approved payments directly to service providers.

**Corporate Works of Mercy Foundation  
"Y-Not Assist" Application**

**PERSONAL INFORMATION**

Name (Please Print): \_\_\_\_\_ Age: \_\_\_\_\_ Date: \_\_\_\_\_

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

How long have you lived at this address? \_\_\_ yrs \_\_\_ months      How many people live with you? \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

Marital Status:  Single  Married  Divorced  Separated  Widowed

Please provide the name, age, and relationship of each person living with you:

Name	Age	Relationship

Are you currently employed?    Yes    No   Please provide employment history for the past 3 years:

Employer	Dates	City, State

**ASSISTANCE INFORMATION**

I am a    SRO/Y-Not Stop Employee    CWM Sponsor Employee    Neighbor Applicant

I am applying for assistance because of the following hardship:

Major Illness/Injury    Funeral/Burial Expenses    Fire/Natural Disaster

*Applicable for SRO/Y-Not or Sponsor Employees ONLY:*    Other - Please describe your unforeseen hardship as it relates to the mission of Corporate Works of Mercy: \_\_\_\_\_

**Please list the bills you want help with from most important to you to less important.  
Please attach copies of the bills. Note: We cannot assist with vehicle purchase down payments.**

Payee	Amount	Due Date	Copy Attached
1.	\$	/ /	<input type="checkbox"/>
2.	\$	/ /	<input type="checkbox"/>
3.	\$	/ /	<input type="checkbox"/>

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

Are you related to any Corporate Works of Mercy Board Members (see below)?    Yes    No

Todd St. Romain	Amanda St. Romain	Annie Gauthier	Annie Brown
Cynthia Flanders	Avery Moses	Nikki Dauzat	J. B. Treuting

