



972-869-3789



mb2dental.com/mb2family



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2403 Lacy Lane, Carrollton, TX 75006

## EMPLOYEE RELIEF FUND AWARD CRITERIA

The MB2 Family Relief Fund provides monetary assistance to MB2 Dental and its affiliated practice employees experiencing financial hardship due to a catastrophic life event of the employee or the employee's immediate family. This fund is designed for financial assistance due to a catastrophic event as defined below.

Requested award amounts are not be guaranteed and all decisions are at the board's discretion.

| EMPLOYEE QUALIFICATIONS & GUIDELINES |  |
|--------------------------------------|--|
| EMPLOYMENT STATUS                    | Full-time, part-time<br>Employee must be in good standing with the company.  |
| TENURE                               | >1 year  |
| DATE OF EVENT                        | Occurred within 90 days of form submission.  |
| MAX # OF AWARDS                      | No more than one award may be granted to any individual applicant or family member in a 12 month period.   |
| ELIGIBLE FAMILY MEMBERS              | Legal spouse, legal dependent (up to 26 years of age), or other legal dependents.  |
| SUPPORTING DOCUMENTATION             | Required on all submissions (receipts, hospital bills, pictures, insurance claims, government documents, police reports, etc. as outlined in forms).   |
| INCOMPLETE SUBMISSIONS               | Incomplete submissions will not be processed. Incomplete submissions will be returned and must be completed and resubmitted within the 90-day period or 3 weeks from submission being returned.    |
| TURNAROUND TIME                      | The MB2 Employee Relief Fund Board will come to a majority vote within 5 business days on whether a request for award will be approved, denied, or further information/documentation is requested. |
| PAYMENT OF AWARD                     | Once approved, a request will be made to MB2 AP with a turnaround time of 2 business days. Check will be sent via mail to the employee recipient.  |

| CATEGORY            | DESCRIPTION OF CATASTROPHIC EVENT  |
|---------------------|--|
| DEATH EVENT         | Severe financial hardship resulting from: <ul style="list-style-type: none"> <li>Death of employee (submitted on the employee's behalf) or immediate family member as defined above</li> </ul>   |
| MEDICAL ISSUE EVENT | Severe financial hardship resulting from: <ul style="list-style-type: none"> <li>Life-threatening, serious, or ongoing illness, accident, injury, or surgery of an employee or immediate family member which has a significant impact on your financial situation resulting in unpaid time off greater than a two-week period and after use of PTO/Sick days and short-term disability.</li> </ul> |



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| <p>NATURAL DISASTER EVENTS<br/> <i>(Acts of nature and fire)</i></p> | <p>Severe financial hardship resulting from:<br/>           Situations such as wildfire, flood, tornado, hurricane, severe storms, or earthquakes that have damaged or destroyed the employee’s primary residence. The fund cannot pay to repair other property and cannot pay to replace non-essential items, e.g, electronics, etc.<br/>           Photographs and insurance reports will be required.</p> <ul style="list-style-type: none"> <li>• Total/Partial loss of primary residence</li> <li>• Damage to essential property or belongings</li> <li>• Temporarily uninhabitable residence resulting in relocation</li> </ul> |
| <p>HOMELESSNESS EVENT</p>  | <p>Severe financial hardship resulting from:</p> <ul style="list-style-type: none"> <li>• Sudden homelessness resulting in need for basic life necessities such as food and shelter</li> </ul>  |
| <p>DOMESTIC VIOLENCE EVENT</p>                                       | <p>Severe financial hardship resulting from:</p> <ul style="list-style-type: none"> <li>• Domestic Violence (physical assault, sexual abuse, and other behaviors resulting in relocations, safety measures, and/or property loss). Emergency protective order (EPO), verification that employee sought help from a professional/social services organization (on their letterhead), or documentation of charges filed is required</li> </ul>  |
| <p>OTHER EVENT</p>   | <p>Severe financial hardship due to other emergencies such as:</p> <ul style="list-style-type: none"> <li>• Divorce or abandonment by legal spouse or loss of income due to disability</li> <li>• Unusual expenses for the care and training of handicapped spouse or dependent</li> <li>• Criminal acts or automobile accidents where the employee or immediate family member is the victim</li> <li>• Other hardships causing life-threatening circumstances or severe financial distress</li> </ul>  |