



## What is the Andy's Outreach Fund?

Andy's Outreach Fund is a charitable fund for employees to contribute to their co-workers who have been directly impacted by a severe hardship, crisis or a catastrophic incident that was beyond their control. Since funding for Andy's Outreach comes from other employees, care is taken to make sure that the grants are given only for unavoidable hardships. Grants must also follow guidelines provided by the IRS.

## What types of help can Andy's Outreach provide?

### Natural Disaster Assistance

- Emergency Assistance for basic living expenses due to a natural disaster that has been officially declared by the President (such as Hurricane Katrina)

### Financial Hardship Assistance

- Triggered by a specific unusual event (such as illness, death, accident, crime or other personal event)
- Financial need and lack of other resources must be substantiated
- Expenses must be proven
- Hardship must be beyond employee's control

### Eligible Financial Hardships Include:

- Residential fire or flooding
- Acts of nature that result in major property damage to primary residence or automobile
- Death of an employee or an immediate family member resulting in a financial hardship
- Other personal financial hardships (such as catastrophic medical expenses)
- Theft/loss of essential property

### Financial Hardships that cannot be granted under IRS guidelines include:

- Lost wages due to missed time from work
- Items covered by insurance or governmental assistance
- Elective, routine or ongoing medical expenses
- Bad debt/overdue bills from ongoing financial problems
- Legal fees and expenses associated with divorce or child custody issues
- Personal bankruptcy
- Circumstances within the employees' control (such as normal maternity expenses, traffic violations, etc.)

## Who can apply?

All current employees are eligible for assistance from Andy's Outreach Fund provided that they complete the attached application demonstrating how they have been impacted by a qualifying event, substantiate their expenses and prove their lack of financial resources. An application must be made within ninety (90) days of the hardship to be considered by the Review Committee. Only one application may be submitted for a qualifying event. If you are in crisis or are experiencing a hardship and would like to speak to someone prior to submitting an application, please contact Dee Shaughnessy at (502) 515-7219.

## How do I apply?

The Application for Employee Assistance is located in each restaurant and will be supplied by the Managing Partner. Applications can also be downloaded from [www.andysoutreach.com](http://www.andysoutreach.com).

The application should be completed in its entirety to ensure prompt and effective consideration. Additional documentation may be requested. *An incomplete application will delay processing and may be returned for completion.*

The application should be submitted to the Support Center via Fax (502) 805-0639, email to [andys.outreach@texasroadhouse.com](mailto:andys.outreach@texasroadhouse.com) or mailed to Andy's Outreach Fund, Inc.; Attn: Brittany Pennington; 6040 Dutchmans Lane; Louisville, KY 40205

The application will be considered and evaluated quickly. ***Please follow-up with your application if you have not heard from Dee Shaughnessy or Brittany Pennington within one week of submitting your application.***

Questions can be emailed to [andys.outreach@texasroadhouse.com](mailto:andys.outreach@texasroadhouse.com) or [Brittany.Pennington@texasroadhouse.com](mailto:Brittany.Pennington@texasroadhouse.com).

## How can I donate to Andy's?

Contributions can be made to Andy's Outreach Fund by personal check, online credit card payment, or through payroll deduction. Payroll donation forms are available in each restaurant or can be downloaded from [www.andysoutreach.com](http://www.andysoutreach.com). Contact Dee Shaughnessy with any additional questions at (502) 515-7219.



## Application for Employee Assistance

Please complete this form in its entirety. ***It is essential that you provide current and accurate information. Any documentation that you have that supports your claim should accompany this application to ensure there are no delays in evaluating your request.*** Please keep a copy of the completed form for your records.

- Mail: Andy's Outreach Fund, Inc.  
Attention: Brittany Pennington  
6040 Dutchmans Lane  
Louisville, KY 40205

**OR**

- Fax: (502) 805-0639 (Make sure the FAX transmits successfully)

**Questions – Call or email Brittany Pennington @ (502) 638-5459 or [andys.outreach@texasroadhouse.com](mailto:andys.outreach@texasroadhouse.com)**

**COMPLETE SECTIONS 1 – 4. PLEASE PRINT CLEARLY.**

### Section 1 – Employee Information

Employee Name: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Alternate Number: \_\_\_\_\_

Email (if available): \_\_\_\_\_

Restaurant Location/Store #: \_\_\_\_\_

Managing Partner Name/Phone Number: \_\_\_\_\_

Have you applied to Andy's before?  Yes  No

If so, did you receive assistance?  Yes  No

When did you apply? \_\_\_\_\_



**Section 4 – Your Financial Resources and Other Expenses**

**Please list all members of your household and their relationship to you:**

Name	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Monthly Household Income:**

Your Regular Wages/Tips	\$ _____	(after tax, attach year-to-date pay stub)
Other Household Wages	\$ _____	(after tax, attach year-to-date pay stub)
Child Support	\$ _____	
Social Security	\$ _____	
Unemployment	\$ _____	
Rent Assistance	\$ _____	
Food Stamps	\$ _____	
Disability	\$ _____	
Other _____	\$ _____	
<b>Total</b>	\$ _____	

**Monthly Household Expenses:**

Rent/Mortgage	\$ _____	(documentation may be requested)
Electric/Gas/Water	\$ _____	
Food	\$ _____	
Car Insurance	\$ _____	
Car Payment	\$ _____	
Gasoline	\$ _____	
Childcare	\$ _____	
Child Support	\$ _____	
Cable/Internet	\$ _____	
Home/Cell Phone	\$ _____	
Credit Card Debt	\$ _____	
Student Loans/Tuition	\$ _____	
Other Debt	\$ _____	
Other _____	\$ _____	
<b>Total</b>	\$ _____	

**Financial Resources of Household:**

Checking Account Balance	\$ _____
Savings Account Balance	\$ _____
Other _____	\$ _____
<b>Total</b>	\$ _____

**Section 4 – Your Financial Resources and Other Expenses Continued...**

**Homeowner's/Renter's Insurance (complete if request is related to loss of primary residence)**

Do you own or rent?  Own  Rent  
Do you have Homeowner's/Renter's Insurance?  Yes  No  
If yes, is this loss covered?  Yes  No  
If yes, amount of deductible? \$ \_\_\_\_\_

**Auto Expenses (complete if request is automobile related)**

Do you have Auto Insurance?  Yes  No  
If yes, is this loss covered?  Yes  No  
If yes, amount of deductible? \$ \_\_\_\_\_  
Will Auto Insurance cover medical expenses?  Yes  No  
If yes, amount of coverage? \$ \_\_\_\_\_  
Will Auto Insurance cover lost wages?  Yes  No  
If yes, amount of coverage? \$ \_\_\_\_\_

If you are requesting temporary assistance to get to work or assistance with automobile repairs:

Is public transportation available?  Yes  No  
Is there another car in your household?  Yes  No  
How far is your commute to work? \_\_\_\_\_

**Medical Expenses (complete if request is related to medical expenses)**

Do you have Medical Insurance?  Yes  No  
If yes, amount of annual deductible \$ \_\_\_\_\_ Co-pay per visit \$ \_\_\_\_\_  
Annual maximum out-of-pocket \$ \_\_\_\_\_  
If no, amount of anticipated government assistance \$ \_\_\_\_\_

**Assistance with Funeral Expenses (complete if request is related to funeral expenses)**

Is Life Insurance available?  Yes  No  
If yes, how much? \$ \_\_\_\_\_  
Will funds be available from decedent's estate?  Yes  No  
If yes, how much? \$ \_\_\_\_\_  
Total assistance family members can provide \$ \_\_\_\_\_

## Section 5 – Required documentation

All of the following documentation is critical in determining the eligibility of your request and to comply with the IRS's requirements:

### Income verification (required for all Requests)

- Copy of a year-to-date pay-stub for employee and all residents of household  
\_\_\_\_\_ **Initial here to authorize Andy's Outreach to obtain pay-stub from Texas Roadhouse**

### Homeowners Reporting Damage to Primary Residence

- Copy of a completed insurance claim form
- Copies of estimate of damage and/or pictures

### Renters Reporting Damage to Primary Residence

- Letter from landlord confirming damage to residence
- Copies of estimates of damaged items and/or pictures

### Automobile Owners

- Copy of a completed insurance claim form
- Copies of estimates and/or pictures
- Police report for thefts/accidents

### Other Incidences

- Documentation that will validate the loss
- Copies of estimates and/or pictures
- Police report for thefts/domestic violence

## Certification & Release

I have done everything possible to help myself before applying for this assistance. I certify that the information contained in this application is true, correct and complete and that I am requesting assistance because of a severe financial hardship which is not covered by insurance or any other sources. By signing the certification below, I also give Andy's Outreach the authority to review medical information pertaining to my Application for Assistance. Medical information would include, but is not limited to, medical claims, doctor's notes, and condition prognosis/diagnosis. I understand that this authorization is voluntary and may be revoked at any time by giving written notice of my revocation to the company contact listed in this application.

\_\_\_\_\_  
Employee Signature (or Delegate)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Relationship

***Once again, please remember to follow-up with your application to confirm receipt if you have not heard from Dee or Brittany within one week of submitting the application. It is our goal to process your application as quickly as possible.***