



Dear EAG Client,

We want to get you your money fast. For us to approve your application, we need ALL the following documentation. Even if you have been an EAG client in the past, we require all your documents again.

You can further expedite the process by labeling your documents in the following way:

Current photo ID (driver's license, passport, or non-driver state ID)

Your Full Name_Photo ID

Performance resume

Your Full Name_resume

Proof of earnings as a performer* (union printout, paystubs, and/or tax returns showing \$7,500+ in at least 3 separate years of the past 5)

Examples:

Your Full Name_SAG earnings 2022
Your Full Name_SAG earnings 2021
Your Full Name_AEA earnings 2023
Your Full Name_AEA earnings 2024
Your Full Name_tax return 2020
Your Full Name_La Mama 1099_January 2022
Your Full Name_Roundabout W2_November 2021

* If you are a union member, please acquire a spreadsheet of your earnings from <https://www.sagafraplans.org/sag-pension> and/or send an email to request your AEA earnings to health@equityleague.org or pension@equityleague.org.

Separate your earnings by year; for instance, to get your 2022 earnings on <https://www.sagafraplans.org/sag-pension>:

- Log in
- Click "Earnings"
- Next to "Date Range," choose "Custom," then type in the dates "1/1/22 to 12/31/22."
- Then under "Actions" (on the right), click "Export Excel." Save, label appropriately (for example, Your Full Name_SAG earnings 2022), and send to us. **As a reminder, we will need to see earnings of at least \$7,500 per year.**



If you are not a union member or if you have additional earnings to share when applying for emergency assistance, you should [use EAG's Annual Performance Earnings Calculator \(https://www.actorsguild.org/performance-earnings-calculator.html\)](https://www.actorsguild.org/performance-earnings-calculator.html) to calculate your earnings, separated by year, and **send the completed pages to us along with the accompanying documents organized by year** (W-2s, 1099s, paystubs, etc.).

Bank Statement (most recent month – we need the whole statement, not just the balance)

Your Full Name_bank statement

Documentation of illness or injury (if applicable)

Your Full Name_medical report

Bills you would like us to consider.

- We can help with rent/mortgage, utilities (electric/gas, telephone, internet) and/or medical/dental expenses (bills, copays, health insurance premiums). We CANNOT assist with credit card bills, any bills associated with your vehicle (payments, insurance, repairs), storage, cable or streaming, tax bills, or overdraft fees.
- We make our payments directly to the vendor and not to the applicant.
- Our maximum grant is \$750. If you are over 65 or have been diagnosed with HIV/AIDS or cancer, you may receive up to \$1,000.

Format Examples:

Your Full Name_Con Ed Bill April 2023

Your Full Name_rent statement 2023

Your Full Name_dental bill June 2023

If we do not receive all requested materials in the proper format, it may delay you receiving your grant.

Many thanks,
The EAG staff