

DEPENDENT CARE (DAY CARE)

Claim Form

COMPANY NAME

(PLEASE PRINT)

REQUIRED

CLAIM CANNOT BE PROCESSED WITHOUT YOUR SIGNATURE

I certify that I utilized Day Care as specified on the claim form and I am claiming reimbursement only for eligible expenses incurred during the applicable Plan Year for qualifying individuals. I understand the limit for actual deferrals and reimbursement will not exceed the lesser of my income, or the earned income of my Spouse, or \$5,000 during any calendar year period. The care provided was for my Dependent under the age of thirteen (13) or for my physically or mentally incapacitated Dependent or Spouse who was unable to care for himself/herself. I understand "incurred" means the date the service was performed.

Participant Signature

Date

EMPLOYEE INFORMATION

REQUIRED - MUST COMPLETE ALL SECTIONS

SSN	DOB	
Last Name	First Name	MI
Address		<input type="checkbox"/> Check if this is a change in address
City	State	Zip Code
Daytime Phone #		

DEPENDENT CARE (DAY CARE) CLAIMS FOR OUT-OF-POCKET EXPENSES

1	Dependent's Name	Service Start Date (MM/DD/YY)	Service End Date (MM/DD/YY)
	Provider's Name	Provider's SSN or Tax ID#	
	<input type="checkbox"/> Child Care <input type="checkbox"/> Before/After School <input type="checkbox"/> Preschool	Out-of-Pocket Cost	
Provider Signature		Date	
<i>(Certifies services provided. Not required. Replaces need for receipt or other proof of service.)</i>			

2	Dependent's Name	Service Start Date (MM/DD/YY)	Service End Date (MM/DD/YY)
	Provider's Name	Provider's SSN or Tax ID#	
	<input type="checkbox"/> Child Care <input type="checkbox"/> Before/After School <input type="checkbox"/> Preschool	Out-of-Pocket Cost	
Provider Signature		Date	
<i>(Certifies services provided. Not required. Replaces need for receipt or other proof of service.)</i>			

Attach a bill or receipt showing service dates, cost and the provider's tax ID or Social Security number or have the provider sign below in the "Provider Signature" section. Canceled checks are not considered sufficient documentation. Day Care provider must be in compliance with any and all applicable federal, state and local regulations governing Dependent Day Care centers.

TOTAL THIS FORM