

# CareFlex Express Spending Account Election

Employer: \_\_\_\_\_

Employee Name: \_\_\_\_\_ Date of Hire: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
P.O. Box / Street City State Zip

Home Phone: (\_\_\_\_) \_\_\_\_\_ E-mail Address\*: \_\_\_\_\_

Payroll Cycle: \_\_\_\_\_ 1<sup>st</sup> Withholding Date: \_\_\_\_\_

## Spending Account Options

*(Use the worksheets provided on the back of this form as a guide for determining expenses.)*

### Health Care Spending Account

I elect to contribute \$ \_\_\_\_\_ per pay, which is \$ \_\_\_\_\_ per year.

*Plan year annual maximum set by your Employer*

### Dependent Care Spending Account

I elect to contribute \$ \_\_\_\_\_ per pay, which is \_\_\_\_\_ per year.

*Plan year annual maximum set by the IRS*

## Dependent Information

*(Complete only if requesting an additional CareFlex Express Card for an eligible dependent)*

Dependent Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Mailing Address (if different from enrollee):

\_\_\_\_\_  
Street/P.O. Box City State Zip

Employee Signature Authorizing Dependent Card: \_\_\_\_\_

\* By including your email address you will have the ability to receive account information including account statements via the web.

*My employer and I agree that my taxable income will be reduced each pay period by the amounts set forth in this agreement. I understand that I may change my election only if certain changes in my status occur (Qualifying Event). Prior to the first day of each plan year, I will be offered the opportunity to re-elect benefits for the upcoming plan year. Any qualified expenses that are submitted by me will be reimbursed to me on a tax-free basis. Any contributions that are not used during the plan year may not be paid to me in cash or used in a later plan year.*

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

CareFlex Benefits Solutions • 205 West Dares Beach Rd. • Prince Frederick, MD 20678  
Phone: 888-577-2762 • Fax: 410-414-8432