

Flexible Spending Account Enrollment Form

Discovery Benefits

Company Name			Employee	e ID/Number		
				-	-	
articipant Name (First	MI Last)		Social Se	curity Number		
		1				
ay Telephone		Hire Date		Birth Da	ate	
reet Address			Email Addr	ess (If provided, all	notifications will be	e sent via ema
ity				State	Zip	
<u> </u>		Doth an	\neg			
Pay Frequency: 12	<u>□</u> 24 <u>□</u> 26 <u>□</u> 48 <u>□</u> 52	Uther		Candan	Manibal Chahua	
				Gender	Marital Status	
. Enrollment Ir						
nrollment Type (select o	one of the following)	Plan Year Dat	es	Month	Day	Year
Open Enrollment P	eriod	Participant I	Effective Date			
New Hire/Change	of Benefit Eligibility	Plan Year En	nding Date			
B. Employee Pre		rian real En	iaiiig Date			
unual Election		nding Account	aual Election	-	ent Care Spendir	g Account
Annual Election \$ (limit is set by your company)			nual Election S limit is \$5,000	\$		
umber of Pay Periods er Pay Period Amount	=		nber of Pay Peri Pay Period Amo			
o be deducted each pay			be deducted each			
		(10				
	es	·				
	es Flex Debit Card? Yes No (if	f offered by employer, all				nte
	es	f offered by employer, all y from your flexible spend ion is required. The flex card is an option with y	ling account at to card must be c your flexible be	the point of service. Iffered by the emplo	Keep your receip	your
A. Do you elect the	ES Flex Debit Card? Yes No (if A Flex Debit Card pays directle Submission of documentate employer to find out if the and the Flex Card as it will reso set up Auto EOB? Yes No	f offered by employer, all y from your flexible spend ion is required. The flex card is an option with yoult in duplicate reimburse (You may not elect both to	ling account at to card must be condition for the condition for the condition for the card and t	the point of service. Iffered by the emploenefits plan. You me d the Flex Debit Car	Keep your receip yer. Check with any not elect both to d as it will result in	your the Auto EOB n duplicate
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B. Would you like t reimbursement.) Auto EOB 6. Participa I authorize my employer cannot change or revoke within 30 days of the stabe reduced because of m that the reimbursement expenses; nor am I see agents or employees, wil	Flex Debit Card? Yes No (if A Flex Debit Card pays directly Submission of documentation employer to find out if the and the Flex Card as it will reserve to set up Auto EOB? Yes No Auto EOB is the automatic cromade automatically to you from available for your group. Obenefits plan. Ant Authorization to reduce my pay on a per pay my election unless I experience tus change. I am aware of the hy reduced salary for tax purpos requests I will be submitting arking reimbursement for these of a not be held liable if I submit not	f offered by employer, all y from your flexible spend ion is required. The flex card is an option with y sult in duplicate reimburse (You may not elect both the sesover of eligible health commyour flexible spending a check with your employ period basis as indicated a status change in accomplan's forfeiture provisionses. I authorize the release IRS eligible expenses a expenses from insurance	ding account at to card must be convour flexible betweent. The Auto EOB an account. Not a account. Not a rer to find out if above. I under dance with International that my See of any inform of that I will not or any other see.	the point of softered by the penefits plan d the Flex D rticipant's he le carriers of Auto EOB retail Revenue ocial Securit nation necessot be nor habource. I also	service. e emplo n. You m rebit Car ealth ins offer thi is an o duction e Code S y and fe sary for ve I bee	ex debit card.) service. Keep your recei e employer. Check with n. You may not elect both to ebit Card as it will result in ealth insurance carrier. Pa offer this feature and it is is an option with your file eduction is for one flex plare e Code Section 125 and su y and federal unemployme sary for Flexible Benefits. ve I been previously reimb
A. Do you elect the Flex Debit Card B. Would you like t reimbursement.) Auto EOB Participa authorize my employer innot change or revoke ithin 30 days of the state reduced because of mat the reimbursement openses; nor am I see gents or employees, will participa understand that if I electors	Flex Debit Card? Yes No (if A Flex Debit Card pays directly Submission of documentation employer to find out if the and the Flex Card as it will restly o set up Auto EOB? Yes No Auto EOB is the automatic cromade automatically to you from available for your group. On the produced may pay on a per pay my election unless I experience tus change. I am aware of the yreduced salary for tax purpos requests I will be submitting arking reimbursement for these of the produced salary for the salary for these of the salary for the salary for the salary for these of the salary for	f offered by employer, all y from your flexible spend ion is required. The flex card is an option with yout in duplicate reimburse (You may not elect both the sesover of eligible health commyour flexible spending a check with your employ period basis as indicated a status change in accomplan's forfeiture provision ses. I authorize the release IRS eligible expenses are expenses from insurance on-IRS eligible expenses for the program until nexpense in the program in the program until nexpense in the program in the program until nexpense in the program in th	ding account at to card must be concerned. The Auto EOB and account. Not a card must be concerned above. I under dance with Internation and that my See of any inform that I will not or any other so or reimbursements at year unless I of the card with the concerned and that I will not or any other so or reimbursements.	the point of service. Iffered by the emploements plan. You must be a plan. You must be a plan. You must be a plan b	Keep your receipyer. Check with way not elect both to do as it will result in urance carrier. Pas feature and it is for one flex plans section 125 and sudderal unemployme. Flexible Benefits. In previously reimlestand that Discovers.	your the Auto EOB a duplicate yment is may not be flexible a year and tha bmit the chan- ent benefits m I hereby cert bursed for the ery Benefits,