



**Flexible Spending Account for:
C.O.P.E.S.D.
Dependent Care Reimbursement Request**

1. Complete Parts A & B in full.
2. Attach a bill or invoice and proof of payment in the form of a copy of a cancelled check or paid provider statement for all expenses incurred.
3. Submit bills monthly to EHIM @ 26711 Northwestern Highway, Suite 400, Southfield, MI 48033.

Part A: Failure to answer all questions may cause a delay in payment.

Employee Name:	Social Security #:
Address (Street, City, State & Zip):	
Date of Birth:	Employer Name:
Home Phone:	Work Phone:

Dependent Name	Date of Birth	Relationship to Insured	Expenses	Dates of Service
1.			\$	From: To:
2.			\$	From: To:
3.			\$	From: To:
Total Claimed:			\$	

Part B: All Information is required per IRS Regulation.

Name of Provider:	Caretakers/Providers Federal Tax ID or Social Security Number:
Place Rendered: <input type="checkbox"/> Employee Home <input type="checkbox"/> Licensed Facility <input type="checkbox"/> Other _____	
Address where services rendered:	
Relationship of Caretaker/Provider to Employee: <input type="checkbox"/> None <input type="checkbox"/> Dependent Child; *Age_____ <input type="checkbox"/> Parent <input type="checkbox"/> Other _____	

**If dependent child is provider of care, must provide age (IRS requires dependent provider to be at least 19 years of age)*

I understand that dependent care expenses reimbursed from the Dependent Care Account cannot be claimed as a Child Care Tax Credit on my Federal Income Tax Return.

Employee Signature

Date

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EMPLOYEE HEALTH INSURANCE MANAGEMENT, INC. 26711 NORTHWESTERN HIGHWAY, SUITE 400 SOUTHFIELD, MI 48033

PHONE: (248) 204-6363 FAX: (248) 204-6350

WEBSITE: WWW.EHIMRX.COM EMAIL: MEDICALCLAIMS@EHIMRX.COM



Qualifying Dependent: A qualifying dependent is a dependent under age 13 for whom you can claim a tax deduction (personal exemption), or a dependent or spouse who is physically or mentally incapable of taking care of himself or herself.

Qualifying Expenses: Dependent care expenses eligible for reimbursement are those for household services and care for qualifying dependents that are incurred to enable you to be gainfully employed. Examples of such expenses are:

- At home child care
- Household services related to the care of the elderly
- Care at licensed schools
- Day care centers

Care cannot be provided by an employee's child under age 19 or by any other person for whom the employee or his/her spouse can claim a personal tax exemption.

Note: Dependent Care Expenses for which you are reimbursed from this plan cannot be claimed as deductions or credits on your Federal Income Tax Return.

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