

## PO Box 350 Conshohocken PA 19428

# Commuter Spending Account Claim Form

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Employee								
Employer Name								
Name	Date of Birth		Er	Employee ID Number				
Street Address	-	City	1		State	Zip Code		
Section A: Parking Spending Account								
To be completed for costs incurred for palot at a train station to continue your con					oloyment, or	cost of parking in a		
Charges for the Month of:				Ar	nount to b	e Reimbursed		

# \$ Total Section B: Transportation Spending Account To be completed for cost incurred for Pass, Tokens, Fare Card or Voucher, which entitles you to use public transportation. Attach supporting documentation Charges for the Month of: Provider of Transportation: Amount to be Reimbursed \$ Total \$ Total

### **Total Expenses:**

### **Authorization**

To the best of my knowledge and belief, my statements in this request for reimbursement are complete and true. I am claiming reimbursement only for eligible expenses incurred during the applicable plan year for myself and/or my legal dependent(s). I certify that these expenses have not previously been reimbursed, nor will they be reimbursed under any other benefit plan and will not be claimed as an income tax deduction. If there is a discrepancy between the total amount of expenses requested above and the total amount of the attached receipts, I will be reimbursed according to the total amount of eligible expenses on the attached receipts.

Emplo <sup>1</sup>	yee Signature:	Date:	

### Step One

- Complete the Employee Information Section of the claim form.
- Step Two
  - Complete Section A, Section B or both
- Step Three
  - Sign and date the section titled Authorization
- Step Four
  - Attach supporting documentation (proof of payment) for eligible parking and/or transportation expenses:
    - Section A: Parking Spending Account Examples of Supporting Documentation:
      - Invoice from parking garage showing name of vendor, dates covered and amounts paid
      - Copy of the front and back of your cancelled check showing payment to a parking garage (please indicate on the front of check the month payment covers)
      - Copy of a contract agreement to have parking expense deducted from your bank account or a copy of the bank statement showing parking expense deducted

### - Section B: Transportation Spending Account Examples of Supporting Documentation

- Copy of pass, token, fare card, voucher or other item that entitled you to use public transportation or private vanpool. If usage date is not stamped on the item, write the information on the sheet beside the photocopy of the item
- Photocopy of the front and back of a cancelled check used to pay for transportation

### Step Five

Retain copies of the entire claim form and supporting documentation for your records. Documents submitted will
not be returned to you.

### Step Six

- Fax the fully completed Commuter Spending Account Claim Form and supporting documentation to fax number 800-595-4642.
- The forms and supporting documentation may also be mailed to:

Spending Account Services FSA Claims Processing PO Box 350 Conshohocken, PA 19428

\*Please file your claim <u>promptly</u>, within the plan year in which charges were incurred, if possible. It is not necessary to accumulate your claims and submit only at year-end. Promptly submitting claims allows additional information to be requested of you as soon as possible.

Please visit your spending account portal or access your account with the mobile application to view your claim and check reimbursement status.

### Important Information Regarding Parking and Transportation Accounts

- Any items for which you are reimbursed through your Commuter Spending Account cannot be claimed for credits on your Federal Income Tax Return.
- The reimbursable amount of your claim is limited by IRS guidelines. The 2022 limits are currently \$280.00 per month for parking expenses and \$280.00 per month for transportation expenses.
- Any money that has not been claimed will remain in your Rollover account and can be used for future expenses.

For questions regarding your Commuter Spending Account, please reference your spending account portal, your mobile application, or your benefit materials.