



Dependent Care Verification Form

This form is for Swerdlin & Co. to verify the eligibility of your daycare provider. This form must be signed by your provider, completed in its entirety, and submitted to Swerdlin & Co. If there are any changes to your dependent care provider or expense amount, you must submit a revised form to Swerdlin & Co. Please note that you still need to submit receipts to Swerdlin & Co. for reimbursement for dependent daycare expenses.

Reason for submission:

- New dependent care verification
- Revision to current verification (i.e. expense or provider change)

Employee/Participant Information

Employee/ Participant Name	Employee Social Security #
<hr/>	
Employer/ Company Name	
<hr/>	
<input type="checkbox"/> Change of Address	Home Address
	City, State Zip
<hr/>	
Home Phone	Work Phone
<hr/>	

Dependent Care Information

1. Name of person(s) for whom the services are provided (names(s) of child, children or adult).

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<hr/>	<hr/>

2. Cost of services provided: _____ per WEEK MONTH YEAR (check frequency for amount)

3. Dates of service: From: _____ To: _____
(Example: From: 1/1/14 To: 12/31/14)

4. Name of the person or organization providing the service:

Print Name of Day Care Provider	Tax ID # or SS# for Care Provider
<hr/>	<hr/>
Signature of Day Care Provider	Date
<hr/>	<hr/>

Note: This form needs to be completed once during the period for which the services are provided. If there is any change to the above information, a revised form must be submitted to Swerdlin & Co. A new form must be submitted for any other period not included in the dates of service noted above. As a participant in this plan, you are responsible for providing correct information and the amounts you request for reimbursement are accurate and for eligible expenses. At the end of each year, your W-2 will confirm the amount contributed to this plan. Keep copies of all claims and receipts for expenses for your records in case of an audit or request for additional information by the IRS. Neither your employer nor Swerdlin & Co. is responsible to provide you with copies of claim forms or receipts.

Please fax this form to (866) 209-3517, e-mail to flex@swerdlin.net, or mail to Swerdlin & Company, 5901 Peachtree Dunwoody Road, B-170, Atlanta GA 30328. For questions, please call (866) 687-4015 or e-mail flex@swerdlin.net. For balance inquiries, visit www.swerdlin.net.