THE UNIVERSITY OF TENNESSEE FLEXIBLE BENEFITS PLAN
DEPENDENT CARE REIMBURSEMENT CLAIM FORM

Employee Name (please print) ____________________________________________
I.D No. or Personnel No. ____________________________________________

Office Telephone Number ____________________________________________
Expenses for Calendar Year 20 ______

Monthly □ Biweekly □

Claim Information

<table>
<thead>
<tr>
<th>Dates of Incurred Expenses</th>
<th>Dependent Name</th>
<th>Relationship to Employee</th>
<th>Provider Of Service</th>
<th>Amount</th>
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Total of Reimbursement $ ______

I hereby certify that all expenses indicated above were incurred by my eligible dependents. I further certify that I have not previously received reimbursement for these expenses from The University of Tennessee Flexible Benefits Plan. I understand that I am solely responsible for the validity of claims submitted for reimbursement and that any expenses reimbursed through the Flexible Benefits Plan cannot be claimed on my personal Federal income tax return.

__________________________  __________________________
Employee Signature                     Date

__________________________  __________________________
Provider’s Signature (if no invoice attached)               Provider’s Address

__________________________  __________________________
Provider’s Social Security Number/EIN              Provider’s Address

REQUIRED DOCUMENTATION FOR DEPENDENT CARE REIMBURSEMENT

Each dependent care expense claimed on this form must be supported by an invoice or statement which includes:

*Provider of Service       *Provider Address
*Dependent Name             *Dates of Expense
*Amount of Expense         *Provider SSN/EIN

If you do not receive an invoice or statement from your provider, ask the provider to sign the claim form, enter their Social Security Number or Employer Identification Number and address.

DUE DATES

Monthly: Claims must be received in the UWA Payroll Office by the 15th of the month (10th for December).
Biweekly: Claims must be received in the UWA Payroll Office on Monday the week before payday.

Revised 05/2008
For dependent care expenses to be eligible for reimbursement, you must be working during the time your eligible dependents are receiving care. If you are married, your spouse must be:

*A wage-earner;

*A full-time student for at least five months during the year; or

*Mentally or physically disabled and incapable of self care.

If you are divorced or legally separated, you may be able to use the Dependent Care Reimbursement Account provided you have custody of your children for a longer period of the calendar year than the other parent, and you contribute more than half of the child’s support.

Any expenses reimbursed under the Dependent Care Reimbursement Plan cannot be claimed as a tax credit on your personal Federal income tax return. You may wish to consult a tax specialist to help you determine whether a reimbursement account, the tax credit, or a combination would be best for your particular situation. Also you may receive information from the IRS (ask for Publication 503).

In general, if you meet the eligibility requirements, you may be able to use the money in your Dependent Care Reimbursement Account to pay for out-of-pocket expenses for the care of:

*Your children under age 13 whom you claim as a dependent for income tax purposes; or

*Spouses and dependents of any age (who normally spend at least eight hours in your home each day if the services are rendered outside the home) who are mentally or physically disabled.

These expenses include charges for such things as:

*Licensed nursery school and day care centers for children;

*Licensed day care centers for disabled dependents; and

*Individuals who have the responsibility of providing care for your eligible dependents, either inside or outside your home. If outside your home, the provider must furnish his/her social security number and home address.

IRS regulations do not allow reimbursement for such expenses as:

*Days you are not working – including sick leave, vacation days, or breaks between semesters – or days when you do not meet the eligibility requirements;

*Care provided by your children who are under the age of 19 or by anyone you claim as a dependent for federal income tax purposes;

*Transportation, education, clothing, or entertainment; and

*Babysitting for social events.

Only expenses which are adequately documented will be reimbursed.

Food and education will be covered if provided by the nursery school or day care center as part of its preschool care services. Food and education expenses are not covered for first grade or higher.