125 Cafeteria Plan Enrollment Form

NATIONAL BENEFIT SERVICES, LLC
Customer Care • Knowledge and Expertise • Organizational Excellence

(Please complete this form and return it to your Human Resource Department)

Personal Information

Company Name

First Name | Last Name | Social Security Number - (Required)

Street Address | Date Of Birth - (Required)

City | State | Zip Code | Date Of Hire - (Required)

Email Address (Required for ACH claim payment notification) | Phone Number

Benefit Election

If you are part of a company health insurance plan your insurance premiums will automatically be paid pre-tax by payroll deduction. You may also choose any of the following benefits to add to your pre-tax deduction:

☐ **Health Care Expenses:** $ ____.__ PER YEAR
Please refer to the SPD for the maximum annual allowable election

☐ **Day Care Expenses:** $ ____.__ PER YEAR
Maximum annual allowable election is $5,000 OR $2,500 if married and filing taxes separately

☐ Initial Request
☐ New Year Request
☐ Waive Participation

Employee Signature

I hereby authorize the appropriate payroll reductions as my contribution(s) to the Cafeteria Plan until changed by me in writing. I recognize that such payroll reductions shall be adjusted automatically in the event of a change in the insurance premiums

Employee Signature
X

Date

Direct Deposit Request

Your Financial Institution

☐ Checking Account
☐ Savings Account

Financial Institution Address

Routing Number

Account Number

IMPORTANT! Please attach a voided check with this form (not a deposit slip). Only for a savings account is a deposit slip acceptable.

I (We) authorize National Benefit Services, LLC to initiate credit entries and, if necessary, debit and adjustment entries for any credit entries and adjustments made in error to my (our) account indicated above and the financial institution named above.

Employee Signature
X

Date

NBS - 418(09/09)

National Benefit Services, LLC
P.O. Box 6980, West Jordan, UT 84084 PH (888)353-9125 Toll Free Fax (800) 478-1528

Please return to your Human Resource department