## **Terms and Conditions**

- I certify that the expenses listed above qualify for reimbursement under IRS guidelines and have been incurred by me or eligible members of my family.
- I understand that I am responsible for the validity of claims submitted to my Pre-tax Accounts, and that these expenses occurred during my coverage period, within the plan year.
- I certify that these expenses were not for cosmetic or general health purposes, and any products claimed do not constitute toiletries/cosmetics.
- I certify that these expenses have not been reimbursed under the above mentioned accounts or by any other source, and will not be claimed as deductible expenses when I file my personal tax returns.
- I understand that I am responsible for retaining copies of valid receipts for a period of 3 tax years per IRS guidelines.
- I will provide valid receipts of service where required and authorize the appropriate Pre-tax Account to be reduced by the amounts shown above.