

DEBIT CARD ORDER FORM

The **take care® Debit Card** must be offered to you and be sponsored by your Employer. You can not order a debit card unless you have been given notification by your Employer. If offered, the annual \$18 fee may or may not be paid by your Employer. If you are required to pay the annual fee, it will be deducted from your Flex Plan account on a pre-tax basis. It is important you understand how to use the card and your responsibility in its use. Instruction will be included with the delivery of your card(s)

Your Employer is paying the debit card fee. You are allowed to order two debit cards. Extra cards, over two, can be ordered at the cost of \$10 each. This cost will be deducted from your Flex Account. The **take care® Debit Card** can be ordered by you at your secure website <https://www.myflexonline.com/Login/Welcome.aspx> or Compensation Consultants, Ltd. can order the cards for you by completing the order form below and submitting the order form with your Flexible Benefit Cafeteria Plan Enrollment Form. If you are only participating in the Dependent Care Account and your daycare provider doesn't take *Visa* or you would rather not use the card, please do not order any cards.

Employer Name: _____

First Card (Please Print)

First Name	Middle Initial	Last Name

Second Card (Please Print)

First Name	Middle Initial	Last Name

New Address (if applicable) **IMPORTANT! Debit Cards will be mailed to your home address.**

Address	City	State	Zip

Please submit this order form with your Flexible Benefit Cafeteria Plan Enrollment Form

Compensation Consultants, Ltd.

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