

FLEXIBLE SPENDING INFORMATION AND LIMITS

Plan Year: July 1 to June 30

Limits:	Flexible Spending Medical	\$2,500
	Flexible Dependent Care	\$5,000

Monthly Fee: \$4.95 per month

Submission of Form: You must complete and submit a new enrollment form each year during open enrollment to the Treasurer's Office.

All moneys contributed to your Flexible Spending Accounts must be used by June 30 and reimbursement must be submitted to Crosby Benefits by September 30.

If a balance remains as of June 30 you will be charged the monthly fee for the months of July, August and September.

Unexpended balances remaining on September 30 are forfeited to the Town of Holliston.