Government of Saskatchewan

Flexible Benefit Claim Form

Last revised: May 2017
Last reviewed: May 2017
Next Review: May 2018

1. Use this form for reimbursement of funds pursuant to the Flexible Benefit Program
2. Guidelines are found Section 1201 (20) of the Human Resource Manual
3. Receipts must be attached, unless funds are being directed to PEPP
4. **Purpose Code: 1 – Fitness; 2 – PEPP/RRSP; 3 – Student Loan; 4 – Financial Planning.**

PLEASE SUBMIT THIS FORM TO THE HUMAN RESOURCESERVICE CENTRE

Personal Information

Surname _____ First Name _____ Employee Number _____

Ministry _____ Branch _____ Eligible Amount This Year _____

Reimbursement Request

Date of Receipt(s) DD/MM/YY	Purpose Code	Description	Amount Requested	Remaining Balance

Request to Direct Funds to PEPP

Date of Receipt(s) DD/MM/YY	Purpose Code	Description	Amount Requested	Remaining Balance
	2	**Please direct funds to the Public Employees' Pension Plan (this form replaces the PEPP Voluntary Contribution Form for this purpose)** **Note: Unused amounts greater than $10.00 as of February 28th will be directed to PEPP**		

Disbursements as detailed above are duly authorized

Employee Name (Please Print) _____ Permanent Head or Designate (Please Print) _____

Employee Signature _____ Permanent Head or Designate Signature _____

Date _____ Date _____

Entered onto payroll System by _____ on _____