



2001 Central Park Avenue Yonkers, New York 10710
(O) 212-629-3131 (F) 212-594-2008

RE: Commuter Benefits Reimbursement Form Information

Dear Elite Team,

Are you having issues with your commuter benefits card? Has it not arrived in the mail? If so, the FBA Claim Reimbursement Form can help. If these issues are forcing you to buy a MetroCard or make any other commuter related purchase with your own money, you should keep all the receipts from each purchase. The next step should be to complete this reimbursement form, attach copies of the receipts, and send it to FBA. FBA is the new commuter benefit company in charge of the commuter benefit cards. Their address, phone number, fax number, and email address are all on the bottom of the form. If they deem the expenses made to be legitimate, then they will mail the reimbursement check to the address you provided, unless you have direct deposit. The money for the check will be taken out from the money in your commuter benefits card.

However, this form will not help you get a new card. In order to get a new card, you need to notify me so I can contact FBA and approve the release of the card. I can be reached at 212-629-3131 Ext. 114 or via email at Kjones@eliteinvestigation.com.

Sincerely,

Kyle Jones



Claim Reimbursement Form

Complete the form below and provide proof of expense for the claims listed below. Claims submitted without proof of expense are not reimbursable. Mail/email/fax all documents to the contact information found at the bottom of this page.

Full Name: _____

Employer: _____

Social Security Number: _____

Phone Number: _____

Your reimbursement check will be mailed to the address listed below unless you are enrolled in direct deposit reimbursements.

Street Address: _____

City, State, Zip: _____

Type of Expense: _____ **Amount:** _____

Type of Expense: _____ **Amount:** _____

Type of Expense: _____ **Amount:** _____

Type of Expense: _____ **Amount:** _____

Type of Expense: _____ **Amount:** _____

Type of Expense: _____ **Amount:** _____

Participant Signature: _____

Date: _____

www.fbaofsyosset.com

Phone (855) 374-6431

Fax (888) 371-8151

claims@fbaofsyosset.com

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