

# South Bay Hotel Employees, Restaurant Employees Trust Funds

Physical Address 7525 SE 24th Street Suite 200 Mercer Island, WA 98040 • Mailing Address PO Box 34203 Seattle, WA 98124  
Phone (800) 544-5085 • Fax (206) 441-9110 • Website [www.southbayheretrust.com](http://www.southbayheretrust.com)

Administered by  
Welfare & Pension Administration Service, Inc.

## CHILD CARE CLAIM FORM FOR REIMBURSEMENT

**Please print the requested information below. See reverse side for child care claim requirements.**

Name \_\_\_\_\_

Social Security Number or ID (as shown on ID card) \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

\_\_\_\_\_  Check Box for Change of Address

Name of Dependent(s)	Month Covered From	Month Covered To	Monthly Benefit
			\$49

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Licensed Provider Signature State of California License Number Date

*The undersigned participant in the plan certifies that the above child care expenses were incurred while the undersigned was eligible for coverage under the Child Care Program. The undersigned understands that he or she is fully responsible for the accuracy and truthfulness of all information relating to this claim.*

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Participant Signature Date

**Please submit this Child Care Claim Form and supporting documentation within 60 days of the child care expense in one of the following ways** (for additional information on supporting documentation, see reverse side):

- Mail to South Bay HERE Trust, P.O. Box 34687, Seattle, WA 98124-1687
- Fax to (206) 441-9110
- Scan and e-mail to [forms@wpas-inc.com](mailto:forms@wpas-inc.com)

## CHILD CARE PROGRAM

**ELIGIBILITY:** You are eligible for the Child Care Program if you meet the Eligibility, Self-Pay and Dependent Contribution Rules of the Health and Welfare Plan. To be eligible, the benefit must make it possible for a Participant or his or her Spouse to work, or for a Spouse to attend school full time.

**BENEFITS:** The Child Care Program pays a monthly benefit of \$49.00 for each family. Expenses must be incurred from the following to be eligible for the \$49.00 Monthly Benefit:

- Licensed/Certified Day Care Providers.
- Licensed Day Care Centers for pre-school children.
- Licensed Day Camps and After School Programs.

**INELIGIBLE EXPENSES:** The following expenses are not considered eligible expenses under the Child Care Program:

- Child Care for a non-licensed Nursery School or Day Care Center.
- Child Care for a child who does not live with the Participant.
- Expense payments to the Participant's dependents, Spouse or other relatives.
- Babysitting.
- Overnight camps or other activities.
- Other expenses as may be determined by the Trustees.

To receive benefits, a canceled check or itemized receipt for expenses is required and must be submitted with the completed Child Care Claim Form to the Administration Office within 60 (sixty) days of the expense. You and the licensed agency must sign the claim form in order to be reimbursed by the Program. Claim forms can be obtained from the Administration Office or the Local Union Office.