



Pro-Flex Administrators Benefit Card Request Form

Pro-Flex Benefit Cards can be ordered online using the Employee Portal available at www.proflextpa.com. Upon logging in, navigate to the **Accounts** tab, select **Profile**, then **Banking/Cards**. Otherwise, please complete the below request and return to Pro-Flex Administrators.

Participant Information

**=Required Fields*

**Employer Name (Do not abbreviate)*

Department

**Participant Name (First, MI, Last)*

**Social Security Number*

**Participant Mailing Address* *Check here if change of address*

Email Address (If provided, all notifications will be sent via email)

**City*

**State*

**Zip*

Cards arrive in sets of two cards per order.

I am placing this order because (select one):

- My card(s) have been lost or stolen, and I need a new card number. I am aware that placing this request will deactivate ALL cards currently associated with my account. A \$5.00 fee will apply and will be deducted from my current account balance.
- I need additional card(s) for my spouse and/or dependents. I am aware that a \$5.00 fee will apply and will be deducted from my current account balance.

Optional:

- I need two additional sets of two cards, a total of four cards. I am aware that a \$5.00 fee will apply to each set of cards that I am requesting.

Authorization

Signature: _____ Date: _____

Return completed form to:

Pro-Flex Administrators, LLC
8321 Main Street
Williamsville, NY 14221
Email: CSR@proflextpa.com
Fax: 716-929-2013 or
toll free 1-855-214-8987

