CustomCare™
Tailored Health Care Plans... And No Premiums!

Ontario

Multiple Employee Summary Form	
Employer:	
Employee Name/ Family Member	**Expense Total**
Total Claims	A
Admin Fee	B
$10.00 Service fee for submission less than $500.00	C
Subtotal (A+B+C)	D
HST = 13% of (B+C)	E
Premium = 2% Tax (A+B)	F
Total Amount Due (D+E+F)	

A $10.00 Processing fee will be charged per company claim if the total claims portion (A) (for all of the employees) is under $500.00.

Please attach a Company cheque for the Total Due made payable to:

CustomCare Inc.

Please ensure all employees sign their individual claim form and attach each employees receipts to their individual claim form. We recommend that you keep a copy of this form for your company records.

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