

Name  
Street Address  
City, State, Zip

## Separation Notice for HRA Participants

Date of Notice:

Date of Separation:

Employer Name:

Employee Name:  
Employee Address:

## Account Summary Current Balance

Integrated HRA:  
Excepted Benefit HRA:

Pending Claims:

*Final Contribution Date: The final contribution date falls between the 15<sup>th</sup> and 20<sup>th</sup> day after the end of the quarter.*

Please Note! You have 90 days from day of termination to incur new expenses and an additional 90 days to submit claims for reimbursement.

Your Reimbursement Account is administered by:

PS Administrators  
1600 Riviera Ave Suite 150  
Walnut Creek, CA 94596  
Phone: 877.739.1574  
Fax: 925.464.7553