MY LIFE IN ORDER

Flex Spending Acccount Log

www.mylifeinorder.com

#	Purchase Date	Patient	Item/Eligibility	Provider	Payment Method	Claim Dates	Amount
					☐ Debit Card ☐ Submit Claim	Submit _____ Ck Rcvd	
					☐ Debit/Bill Pay ☐ Submit Claim	Submit _____ Ck Rcvd	
					☐ Debit/Bill Pay ☐ Submit Claim	Submit _____ Ck Rcvd	
					☐ Debit/Bill Pay ☐ Submit Claim	Submit _____ Ck Rcvd	
					☐ Debit/Bill Pay ☐ Submit Claim	Submit _____ Ck Rcvd	
					☐ Debit/Bill Pay ☐ Submit Claim	Submit _____ Ck Rcvd	
					☐ Debit/Bill Pay ☐ Submit Claim	Submit _____ Ck Rcvd	
					☐ Debit/Bill Pay ☐ Submit Claim	Submit _____ Ck Rcvd	
					☐ Debit/Bill Pay ☐ Submit Claim	Submit _____ Ck Rcvd	
					☐ Debit/Bill Pay ☐ Submit Claim	Submit _____ Ck Rcvd	
					☐ Debit/Bill Pay ☐ Submit Claim	Submit _____ Ck Rcvd	
					☐ Debit/Bill Pay ☐ Submit Claim	Submit _____ Ck Rcvd	
					☐ Debit/Bill Pay ☐ Submit Claim	Submit _____ Ck Rcvd	
					☐ Debit/Bill Pay ☐ Submit Claim	Submit _____ Ck Rcvd	
					☐ Debit/Bill Pay ☐ Submit Claim	Submit _____ Ck Rcvd	
					☐ Debit/Bill Pay ☐ Submit Claim	Submit _____ Ck Rcvd	