



Adoption Assistance

Payment Request

Please complete this form and attach a copy of the final legal documents providing evidence of the adoption, including the final adoption papers.

To review the Adoption Assistance Program, please refer to the Adoption Assistance Guidelines on The Source (Partner Central>My Benefits>Benefits Documents).

Note: You may only file a claim for benefits **after an adoption** is finalized.

Partner Name:
Date of Hire:
Circle One: Part Time/Full Time
Work Location:
Date of Adoption:
Are you or your spouse the parent, grandparent, or legal guardian of the child being adopted (Circle One): Yes/No

The completed forms and required documentation can be sent to your Human Resource Department. The request for payment and documentation will be forwarded to Home Office Benefits for review and processing. If approved, payments will be made via payroll check.

If you have any questions, please contact your Human Resource Department or Home Office Benefits.

Partner Signature Date