



Office Use Only	
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PrimeFlex Form #2 – Pre-Tax Transit & Parking Enrollment Form

Entry (effective start) date: _____ (first day of month) Payroll deduction start date: _____ (weekly, every Thursday)

To be completed by employee and given to employer (Please print clearly)

Employee Information:

Name: (Last, First, Middle)	Social Security Number:	Date of Birth:
Street:	City:	State: Zip Code:
Employer:	Home Telephone Number: ()	
E-mail:	Mobile Telephone Number: ()	

Monthly Contribution

Please complete the following section to indicate the type(s) of Pre-Tax Transit/Parking Plan(s) you want to participate in. Also indicate the monthly contribution amount(s). These elections may be changed on a monthly basis. New elections are prospective and must be submitted prior to the beginning of the month.

I will participate in the following Pre-Tax Plan(s):

	<u>*Per Weekly Pay</u>	(*first four pay periods of each month only)
<input type="checkbox"/> Mass Transit	\$ _____	
<input type="checkbox"/> Parking	\$ _____	
Total	\$ _____	

Transportation Expense Limits

- Qualified Mass Transit pre-tax expenses are eligible up to \$ 270 per month for the 2020 calendar year.
- Qualified Parking pre-tax expenses are eligible up to \$ 270 per month for the 2020 calendar year.

I authorize the reduction of my salary on a per paycheck basis by the amount indicated above. I understand that any pre-tax monies not used for eligible expenses incurred during my employment will be forfeited in accordance with IRS regulations at the end of my employment. There is a “runout” period of 30 days for employees to submit claims for eligible expenses that occurred prior to employment separation. You may contact the PrimeFlex support line for additional information/questions at 1-877-769-3539 and/or PrimeFlex@PrimePay.com.

Employee Signature: _____ Date: ____/____/____

Employer Signature: _____