



**TRANSPORTATION EXPENSE ACCOUNT PLAN
PAYROLL DEDUCTION ACCOUNT
CHANGE IN PARTICIPATION ***

PLEASE PRINT OR TYPE:

LAST NAME: _____ FIRST: _____

EMPLOYEE ID OR SSN: _____ WORK PHONE: _____

DEPARTMENT: _____ LOCATION: _____

Check One:

___ I am enrolling or currently participating in the Park and Shuttle, and/or Metropass/Metro Mobility programs, and/or pay for parking through payroll deduction. I hereby elect to waive the opportunity to participate in the Ramsey County Transportation Expense Account Plan -Payroll Deduction Account. I understand that by waiving participation, amounts deducted from my check for these programs will be taken after all federal and state taxes have been collected.

___ I am revoking my prior waiver of participation and now elect to participate in the Transportation Expense Account Plan - Payroll Deduction Account.

Employee Signature: _____ Date: _____

**** This form should only be used to change the tax status of your deduction. If you wish to cancel participation in one of the programs (such as Metropass), you must complete a separate cancellation form, available from your Department HR/Payroll Contact or on countyfiles on 'Rex'/Human Resources/Transportation.***

This form must be received by your Department HR/Payroll Contact by the 15th of the month prior to the month in which the change is to be effective.

Keep a copy for your records.

For payroll use only:

Date received: _____ Effective date: _____