



The California State University
PRE-TAX PARKING DEDUCTION ELECTION AUTHORIZATION

Please type or use ball point pen, print clearly. Send completed form to campus Human Resources Office.

Employee Name: (first) (initial) (last)

Please check the appropriate box.

I **decline to participate** in the CSU Pre-Tax Parking Deduction Plan and wish to pay for parking expenses with after-tax earnings through payroll deduction.

I **request to participate** in the CSU Pre-Tax Parking Deduction Plan and pay for parking expenses with pre-tax earnings through payroll deduction. *[Not for use during initial automatic enrollment]*

- I understand that enrollment in the Pre-Tax Parking Deduction Plan is automatic for parking paid through payroll deduction. I also understand that participation in the Plan is optional and I may choose to start/stop participation at any time in the future pursuant to eligibility and Plan guidelines.
- I understand that I must complete and return this form to the campus Human Resources Office by the 5th day of the month in order for the change in participation to be effective the 1st day of the following month.

Employee Signature: _____ Date: _____

Employee SSN: _____

- For Office Use Only -

I have received notification of employee's decision to start ____ stop ____ (check appropriate selection) participation in the CSU Pre-Tax Parking Deduction Plan.

Benefits Officer Signature: _____ Date: _____

Campus: _____ Phone No. _____

Mail completed form to:

State Controller's Office
Personnel/Payroll Services Division, Collective Bargaining Unit
P.O. Box 942850
Sacramento, CA 94250-5878

Distribution: White – State Controller's Office

Yellow – Campus

Pink - Employee