

# SECTION 125 FLEXIBLE BENEFIT PLAN

2007

## EMPLOYEE ENROLLMENT AUTHORIZATION FORM

Employer		Job Title		Present Salary \$	
Employee's Last Name		First Name		Mid. Init.	Phone #
Employee's Address: (Reimbursement Checks will be sent to this address) Street		City		State	Zip
Social Security Number	Date of Birth	___ Male	___ Single ___ Divorced	Hire Date	Hrs. Worked Weekly?
____ / ____ / ____	____ / ____ / ____	___ Female	___ Married ___ Widowed	____ / ____ / ____	
Are you paid: <input type="checkbox"/> Weekly (52/yr) <input type="checkbox"/> Semi-Monthly (24/yr) <input type="checkbox"/> Other _____ <input type="checkbox"/> Bi-weekly (26/yr) <input type="checkbox"/> Monthly (12/yr)					

### AUTHORIZATION FOR COVERAGE AND PARTICIPATION

I request the following amounts be deducted from my salary **per pay period**, as follows:

Health Insurance Premiums	\$ _____	Medical Expenses	\$ _____
Administrative Fees	\$ _____	Daycare Expenses	\$ _____
Other _____	\$ _____	Other _____	\$ _____

I certify the information above to be correct and true to the best of my knowledge. I authorize payroll deductions from my earnings for any contribution I am making toward the cost of any of the above. Applicable account(s) at the end of the plan year not used for eligible expenses incurred during the plan year will be forfeited in accordance with current plan provisions and tax laws. I further understand that the Section 125 Flexible Benefit Plan deduction(s) will be in effect for the plan year and cannot be revoked unless I experience a change in my family status as defined in the Plan Document.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### DECLINATION OF COVERAGE AND PARTICIPATION

I have been given the opportunity to participate in the above Section 125 Flexible Benefit Plan and have elected not to do so. If I later wish to enroll in this Plan, I understand that my eligibility and effective date will be determined according to Plan Document provisions elected by my Employer.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## **Administrative Solutions, Inc.**

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