

FLEXTRANS AFTER-TAX SELECTION FORM

Social Security Number: _____

Name: _____

Address: _____

City, State, Zip: _____

Email: _____

Under Internal Revenue Code (IRC) 132, the State of Georgia offers a pre-tax option for qualified transportation and parking benefits. I have reviewed and understand the tax savings this option provides to employees that have pre-tax payroll deductions for transportation expenses.

Although I would receive a tax-free benefit, I am requesting that my personnel/payroll office take my payroll deduction as an after-tax option. I understand this will be kept in my personnel file and be in effect until I instruct my personnel/payroll in writing to reverse my election.

Signature

Date

Cancellation of After-Tax Deduction

I, _____ (SSN _ _ - _ - _ _ _ _), hereby authorize cancellation of my request to have my payroll deducted transportation expenses as after-tax.

Signature

Date