



VIRGINIA DEPARTMENT
OF AGRICULTURE AND
CONSUMER SERVICES

PARKING SPACE PAYROLL DEDUCTION FORM

I hereby authorize the Finance Office, Department of Agriculture and Consumer Services to deduct \$24.50 semi-monthly from my earnings beginning on payroll to be paid to the Commonwealth of Virginia for parking in STATE LOT NO. _____ SPACE NO _____

**SALARY REDUCTION AGREEMENT FOR PRE-TAX PARKING FEE PROGRAM
CODE 132(f)(4) ACCOUNTS**

INSTRUCTIONS:

- To begin or terminate participation in the Pre-Tax Parking Fee Program, check the appropriate box below
- Fill in the effective date of your participation (must be the 1st or 16th of the month following the next payday after form submission)
- Print your name and social security number, sign and date the form
- Submit the completed form to the Finance Office

Yes, I wish to participate in the Pre-Tax Parking Fee Program.

Begin my participation on _____
Mo Day Year

No, I do not wish to participate in the Pre-Tax Parking Fee Program.

I understand that as of the paycheck dated _____*, my semi-monthly taxable salary will be reduced by \$24.50. I understand that this amount will change if there is a change in the DGS published parking fee rate. This agreement is legally binding and may not be terminated until I complete another Salary Reduction Agreement or my employment is terminated.

By _____

Employee Name (Please print)

Employee Identification Number
Or Social Security Number

Employee Signature

Date

Payroll Contact

Date

* Determined by Payroll office