

**Flexible Spending Account
Calendar Year 2010
ELECTION FORM**

**Employee and Retiree Service Center (ERSC)
Montgomery County Public Schools
7361 Calhoun Place, Suite 190
Rockville, MD 20855**

INSTRUCTIONS: Complete, sign, and return to the Employee and Retiree Service Center (ERSC). You may fax this form to: 301-279-3651 or 301-279-3642. Please visit the ERSC website for additional information.

PART I: EMPLOYEE INFORMATION (PLEASE PRINT)

Name: _____ Last Four Digits of SSN: _____ Employee ID: 0000 _____

E-mail: _____ Home phone: _____

You must select one of the following reasons for your account election:

_____ New Employee _____ Open Enrollment _____ Return from Leave

Qualifying Event: _____ Marriage/Divorce _____ Birth/Loss of a Child _____ Other (i.e. Change in Job Status)

PART II: ACCOUNT ELECTIONS

Annual contributions are **calendar** year (January 1 through December 31) and are divided into equal installments over 20 pay periods for 10-month employees or 26 pay periods for 12-month employees. Please enter the total annual flexible spending amount to be deducted towards your medical spending account and/or your dependent/child care spending account. Reminder: If you enroll outside of open enrollment, deductions will begin on the first pay period from the date this form is received. Deductions will be taken in equal installments over the remaining pay periods in the current calendar year.

Calendar Year Paycheck Schedule	
10-month	12-month
Jan-15	Jan-15
Jan-29	Jan-29
Feb-12	Feb-12
Feb-26	Feb-26
Mar-12	Mar-12
Mar-26	Mar-26
Apr-9	Apr-9
Apr-23	Apr-23
May-7	May-7
May-21	May-21
Jun-4	Jun-4
Jun-18	Jun-18
	Jul-2
	Jul-16
	Jul-30
	Aug-13
	Aug-27
	Sep-3
Sep-24	Sep-24
Oct-8	Oct-8
Oct-22	Oct-22
Nov-5	Nov-5
Nov-19	Nov-19
Dec-3	Dec-3
Dec-17	Dec-17
Dec-30	Dec-30

Medical Spending Account:

Eligible medical expenses are available at www.myshps.com.

Minimum annual contribution is \$100
Maximum annual contribution is \$4,000
MCPS matches first \$100 of contribution

Enter Your Annual Contribution Amount

\$.00
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+ \$	100.00

MCPS Contribution

Cancel Current Account: Cancels existing Medical Spending Account elections due to a qualifying event

Qualifying Event: _____

Dependent/Childcare Spending Account (Non-medical):

Eligible childcare expenses are available at www.myshps.com.

Minimum annual contribution is \$100
Maximum combined family annual contribution is \$5,000

Enter Your Annual Contribution Amount

\$.00
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Cancel Current Account: Cancels existing Dependent Care Spending Account elections due to a qualifying event

Qualifying Event: _____

PART III: SIGNATURE

I understand that this election may not be changed or revoked during the calendar year, with the exception of a change in family status (see specific list of qualifying events on the SHPS | Carewise website). Money cannot be transferred to another spending account or refunded to the employee. IRS regulations impose a "use or lose" rule, requiring the forfeiture of money not used during the plan year (January 1, 2010 through March 15, 2011).

Signature

Date