

Fill out the top and bottom sections of this form. Fields marked with an asterisk are required. Choose the applicable sections to fill out in the middle of the form.

This form must be submitted within 30 days of your event change. Before submitting this form, be sure to verify that you have an eligible Change of Status. Examples of eligible status changes include: marriage, divorce, birth, death, etc. For additional information on IRS status changes please refer to the Change of Status Matrix.

*Employee Name: _____

*Employee ID: _____ *Date: _____
(First initial, last name, last four digits of Social Security Number) (MM/DD/YYYY)

Replace Current Election

I want to replace an existing election with a new election effective (MM/DD/YYYY): _____
(This date cannot be before the Change of Status event date, or before the date this form is received by your eflex Administrator.)

Existing Benefit Election: _____ Deduction Amount per Pay Period: _____

New Benefit Election: _____ Deduction Amount per Pay Period: _____

Change of Status Event: _____

Date of Event (MM/DD/YYYY): _____

Payroll Date when Changes will be Made (MM/DD/YYYY): _____

Terminate Election

I want to terminate an election effective (MM/DD/YYYY): _____
(This date cannot be before the Change of Status event date, or before the date this form is received by your eflex Administrator.)

Change of Status Event: _____

Date of Event (MM/DD/YYYY): _____

Payroll Date when Changes will be Made (MM/DD/YYYY): _____

Add New Election

When adding a new election, you also need to fill out and submit an Enrollment Form, which can be found on our website (www.eflexgroup.com).

I want to add a new election effective (MM/DD/YYYY): _____
(This date cannot be before the Change of Status event date, or before the date this form is received by your eflex Administrator.)

Change of Status Event: _____

Date of Event (MM/DD/YYYY): _____

I certify that I have the above change of status and request that the indicated changes are made to my flex account/elections as a result.

*Employee Signature: _____ *Date (MM/DD/YYYY): _____

*Employer Signature: _____ *Date (MM/DD/YYYY): _____