2021 Commuter Benefit Program Election Form
The Federal Judiciary Benefits Program

Effective Date of Coverage:
Please refer to the effective date schedules posted on the JBC site for determination of your effective date of coverage.

Election Limits:
Mass Transit Account - If you wish to enroll in the Mass Transit Account, please indicate the amount you wish to contribute per month. The maximum allowable monthly election is $270 and the minimum allowable monthly election is $1 for eligible expenses.

Parking Reimbursement Account - If you wish to enroll in the Parking Reimbursement Account, please indicate the amount you wish to contribute per month. The maximum allowable monthly election is $270 and the minimum allowable monthly election is $1 for eligible expenses.

Three ways to enroll:

WEB
Via **JENIE** or directly at:
https://judiciary.lifeatworkportal.com

FAX
855-904-0348

MAIL
Judiciary Benefits Center
PO Box 18031
Norfolk, VA 23501-1885

A. Personal Information (Please Print)

NAME: _____   EMPLOYEE ID: _____   DATE OF BIRTH: _____

ADDRESS: _____   CITY: _____   STATE: _____   ZIPCODE: _____

EMAIL: _____   PHONE NUMBER: _____

B. Election Enrollment/Change

Mass Transit Account election

Election to Participate - I hereby elect to participate in the Commuter Benefit Program – Mass Transit Account.

I elect to contribute $_____ monthly.

Parking Reimbursement Account election

Election to Participate - I hereby elect to participate in the Commuter Benefit Program – Parking Reimbursement Account.

I elect to contribute $_____ for the following month.

C. Signature - Please read the following carefully before completing your election:

• I agree that my compensation will be reduced by the amount I have elected under the Commuter Benefit Program, continuing for each pay period until this agreement is amended or terminated.

• I understand that any pre-tax elections I have made will reduce my compensation for Social Security tax purposes. This means that my Social Security benefits could be decreased.

• My election amount(s) will be noted on my confirmation statement.

Signature   **Date**