

Oregon State Employee
Monthly Transit Payroll Deduction Enrollment
Cherriots / Commuter Club / Oregon Coachways

State of Oregon employees have the option of paying for transit, vanpool or commuter bus costs by payroll deduction. The cost is deducted from paychecks each month, all or part of it pre-tax, as shown. Your agency will mail the transit passes to you.

To enroll in the program, complete this form and return it to your agency payroll office. This authorizes your agency to make the payroll deduction and to adjust it for any fare increases. To make changes or cancel your deduction, use the Change/Cancellation form. Please allow six weeks for payroll to process your request.

PRINT Name _____

Home Mailing Address _____

City _____ State _____ Zip _____ Work Phone _____

I request the following deduction (check one):

- | | |
|---|----------|
| <input type="checkbox"/> Cherriots (Salem only, \$35 pre-tax) | \$35.00 |
| <input type="checkbox"/> Cherriots (Salem + Wilsonville 1X service, \$55 pre-tax) | \$55.00 |
| <input type="checkbox"/> Cherriots (Salem only, Special Citizen, \$15 pre-tax)
(Special Citizen: age 60+ or persons with disabilities) | \$15.00 |
| <input type="checkbox"/> Commuter Club (\$115 pre-tax/\$70 post-tax) | \$185.00 |
| <input type="checkbox"/> Oregon Coachways (\$115 pre-tax/\$75 post-tax) | \$190.00 |

Starting month: _____

State of Oregon Authorization
For Monthly Transit Cost Payroll Deduction

*I authorize my agency to deduct from my wages \$_____per month until further notice.
I also authorize my agency to adjust this amount to accommodate fare increases.*

Print Name

Signature

Date

Agency Payroll Offices – Please contact Dorothy Fitzpatrick at Cherriots (503) 588-2424 x2383 to provide your agency information if you have not previously processed any monthly bus passes.

Oregon State Employee
Monthly Transit Payroll Deduction Change/Cancellation
Cherriots / Commuter Club / Oregon Coachways

To make changes or cancel your deduction, complete this form and return it to your agency payroll office. Please allow six weeks for payroll to process your request.

Check Requested Change

Address Change

PRINT Name _____ Eff. Date of Change _____

New Home Mailing Address _____

City _____ State _____ Zip _____ Work Phone _____

Cancel My Deduction

Please cancel my transit cost payroll deduction.

The last month I want to pay for is _____.

Change My Deduction Type to:

Cherriots (Salem only, \$35 pre-tax) \$35.00

Cherriots (Salem + Wilsonville 1X service, \$55 pre-tax) \$55.00

Cherriots (Salem only, Special Citizen, \$15 pre-tax) \$15.00
(Special Citizen: age 60+ or persons with disabilities)

Commuter Club (\$115 pre-tax/\$70 post-tax) \$185.00

Oregon Coachways (\$115 pre-tax/\$75 post-tax) \$190.00

Starting month: _____

Restart My Deduction

I would like to restart my transit cost payroll deduction for Cherriots

Commuter Club Oregon Coachways for the month of _____.

State of Oregon Authorization
Change in Transit Cost Payroll Deduction

Print Name

Signature

Date