



Don't lose the chance to put up to \$1,000 back into your pocket this year!

Participating in a commuter account is like receiving a 30% discount on mass transit and parking expenses.

How does a commuter account work?

A commuter account allows you to set aside pre-tax dollars for mass transit and parking expenses associated with your daily commute to work.

There are two types of commuter accounts: mass transit and parking. You have the option to enroll in one or both accounts. You choose a monthly election amount, up to \$270 for mass transit expenses and \$270 for parking expenses. The money is placed in your account via payroll deduction and then used to pay for eligible commuting expenses.

Why should I enroll in a commuter account?

If you take public transportation to work or pay for parking, you'll want to take advantage of the savings these plans offer. Money contributed to a commuter account is free from federal and state taxes and remains tax-free when it is spent on eligible expenses. On average, participants enjoy a 30% tax savings on their annual contribution. This means you could be saving up to \$1,000 per year on commuter expenses!



How do I use my commuter account to pay for mass transit and parking expenses?

You can use your [Company Name Debit Card] to pay for commuting expenses, or vouchers can be used to pay for transit tickets, passes, or to pay parking vendors.

Qualifying expenses

What qualifies?

Commuter funds can cover costs for:

- Bus, ferry, train, subway tickets and passes
- Vanpool fees when there are six or more adult passengers
- Parking expenses, including parking at or near your place of work or at the location from which you take mass transit to get to work

What doesn't qualify?

Certain expenses are not eligible, for instance:

- Tolls
- Taxis
- Gas/fuel
- Mileage

Online & mobile access

Get instant access to your account

- View your account balance and transaction history
- Upload and store receipts
- View important alerts and communications
- Sign up for text message alerts



Register for the PBS Wealthcare Portal at <https://profben.wealthcareportal.com/>



Download the PBS Wealthcare App at the App Store or Google Play.

Helpful hints

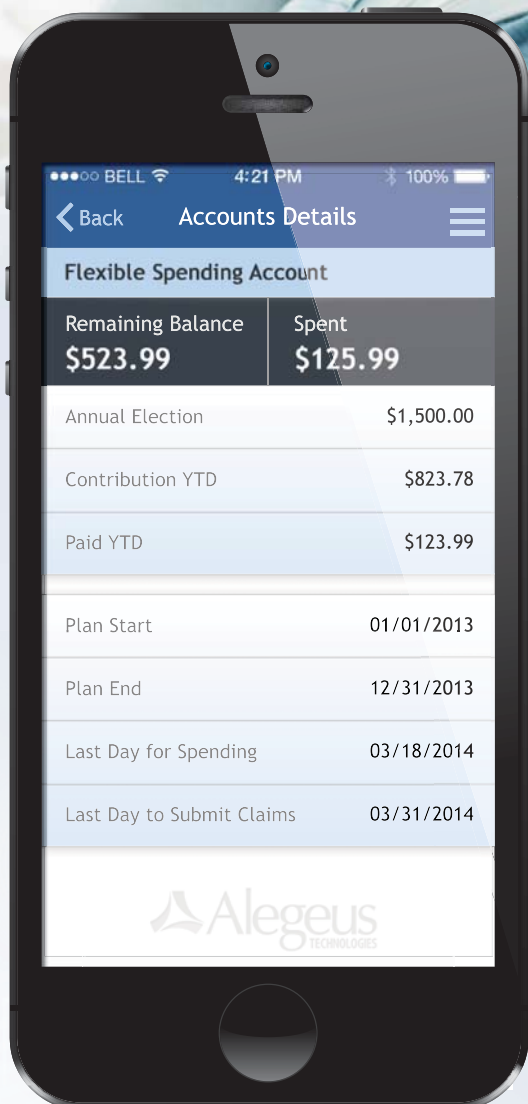
- You must have funds in your commuter account before you can spend them.
- You can change your election amount or terminate plan participation at any time.
- Save your receipts when you spend your commuter account dollars. You may need itemized invoices to verify the eligibility of expenses.
- The easiest way to manage your account is online at [Member Portal URL] or through the [Mobile App].
- Any unused funds that remain in your account at the end of the year will be carried over into the next plan year, if you continue to participate in the plan.

New Mobile App Available!

- Check your balances
- Review your transaction history
- Submit Claims
- And much more...

TEXT "BAL" to 97487

To receive your current balance. Make sure to allow your cell phone to receive SMS alerts in the communication preferences page of the participant portal.



Download the app today.

Have the account information you need, right when you need it most. Our mobile app provides a single access point for you to manage all of your tax-advantaged benefit accounts from any iOS or Android mobile device. You can also configure account alerts via text message.



Google Play App

Scan the QR codes or search for "PBS Mobile" at the Apple Store or Google Play



Apple Store App





Marion County Transportation Benefit Plan Participation Agreement

Plan Year

Effective Date

Last Name	<input type="text"/>	First Name	<input type="text"/>	Middle Initial	<input type="text"/>
Phone Number	<input type="text"/>	Department	<input type="text"/>	Emp. Number	<input type="text"/>
Mailing Address	<input type="text"/>	City	<input type="text"/>	State	<input type="text"/>
				Zip Code	<input type="text"/>

I elect to enroll in the Transportation Benefit Plan option below and authorize Marion County to reduce my pay by the monthly amount(s) indicated:

- Mass transportation expenses (up to \$130/mos):
- Qualified parking expenses (up to \$270/mos):
- Commuter Highway Vehicle expenses (up to \$130/mos):

I understand that the salary reduction I have elected for mass transportation expenses are recorded separately from the salary reduction for parking expenses. If there is money recorded in one account at the end of the year, it is not transferable to meet expenses in the other category.

I understand that any money remaining in my Transportation Benefit Plan at the end of the Plan Year will be returned to my employer or may be rolled over to the next Plan Year, for future reimbursement. I have received a written explanation of the Transportation Plan Account. I understand that the employer cannot be responsible for any tax liabilities that may subsequently occur as a result of my Plan participation.

Employee Signature	<input type="text"/>	Emp. Number	<input type="text"/>	Date	<input type="text"/>
--------------------	----------------------	-------------	----------------------	------	----------------------

**Return completed form to Marion County Benefits:
MCEmployeeBenefits@co.marion.or.us**

This Plan Administered by Professional Benefit Services, Inc.
Phone: (800) 982-2012 or (503) 371-7622
Fax: (503) 364-6901
Email: cafeteria@profben.com
Website: www.profben.com

CLAIMS SHEET

TRANSPORTATION BENEFIT

CLAIMS FOR: _____
Employee Name

EMPLOYER:

This is to certify that I have incurred expenses in the amounts shown below that qualify for reimbursement under the provisions of my employer's Transportation Benefit Program.

TRANSPORTATION BENEFIT REIMBURSEMENT EXPENSES:

Mass Transportation Expenses \$ _____

Parking Expenses \$ _____

I am attaching written documentation for the expenses shown above. This documentation shows payee, effective dates and specific charges as required for reimbursement. I certify that these expenses were used for the purpose of traveling to or from my workplace and that these expenses are not reimbursable from any other source.

Date

Employee Signature

SEND CLAIMS TO:
PROFESSIONAL BENEFIT SERVICES, INC. 1193 ROYVONNE SE, SUITE 22
SALEM, OR 97302 Phone 1-800-982-2012, 503-371-7622 Fax 503-364-6901