

**CLACKAMAS COUNTY
MONTHLY TRANSIT PASS/TICKETS PAYROLL DEDUCTION FORM**

Clackamas County employees have the option of paying for a Tri-Met transit monthly pass or book(s) of tickets using pre-tax income. Clackamas County is using the [Trimet Hop Fastpass Program](#). Participants are sent a County issued Hop card, which will be loaded with their order each month.

The County will pay 50% per month towards your pass or book(s) of tickets. The Benefits and Wellness Division will deduct the amount you owe Tri-Met from the second paycheck of each month. Since the amount you owe will be deducted in pre-tax dollars, your net paycheck will be reduced by a lesser amount.

This policy applies to all benefit eligible (regular full-time and part-time) employees. Temporary and contract employees are not eligible. Please reference EPP 57 Transit Assistance for more information.

Employees may begin or end their participation in the program at any time by submitting a completed cancellation form with a minimum of four weeks advance notice.

Please sign the form at the bottom of this page which authorizes the County to make the deduction and adjust it for fare increases.

Print Name _____

<p>I authorize Payroll on the second paycheck of each month to deduct from my wages the amount specified below until further notice. I also authorize the County to adjust this amount to accommodate fare increases. I pledge to use the Tri-Met pass or tickets primarily for my own transportation to and from work. I understand that the sale, trade or transfer of transit passes given by my employer is strictly prohibited.</p>	
<ul style="list-style-type: none"> <input type="radio"/> \$50.00 for a monthly Tri-Met transit pass <input type="radio"/> \$37.00 for a monthly LIFT Tri-Met transit pass <input type="radio"/> \$25.00 for two adult 10-ticket books of 2-hour tickets (20 total tickets) <input type="radio"/> \$12.50 for one adult 10-ticket book of 2-hour tickets (10 total tickets) 	
Date _____	
Signature _____	Employee # _____
Department _____	Work Phone _____

Deadline for sign-up or cancellation	Change will affect this transit pass/tickets
1 st Thursday of the month	Pass/tickets effective the first day of the next month.
Example: December 5, 2024	January 1, 2025

**Return form to HR-Benefits: Benefits@clackamas.us
Benefit Line Questions: 503-655-8550**