

**Salary Reduction Agreement**  
**(For HealthFlex elections – Medical Reimbursement Account)**

**Participant Name** \_\_\_\_\_

**Name of Employer/Salary-Paying Unit** \_\_\_\_\_

**Purpose of this Agreement:**

- This agreement is to set forth the terms of making **before-tax (salary reduction) contributions to the payment of HealthFlex elections made for a Medical Reimbursement Account owed by the participant named above to the General Board of Pension and Health Benefits of the United Methodist Church.** HealthFlex is a health plan administered by the Dakotas Annual Conference of the United Methodist Church and the General Board of Pension and Health Benefits of the United Methodist Church. These contributions are defined in section 125 of the Internal Revenue Code.
- Such contributions do not appear in Box 1 of the W-2 to the participant.

**Term of the Agreement:**

- The term of this agreement shall end on December 31st of the current year, or the termination of the participant's employment with the employer/salary-paying unit, or the participant's death.

**Agreement:**

Beginning date of this agreement \_\_\_\_\_ *(specify month, day and year).*  
*(NOTE: This must be a date subsequent to the date on which this agreement is signed. This agreement will be in effect until a new agreement is in place.)*

The participant's annual compensation on the beginning date of this agreement shall be reduced by \$\_\_\_\_\_.

This reduction in compensation will occur: \_\_\_\_\_ twice a month \_\_\_\_\_ monthly.

**Acceptance by the Employer/Salary Paying Unit and the Participant**

Employer/Salary Paying Unit Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Participant Signature \_\_\_\_\_ Date \_\_\_\_\_