



**Schedule "A"**

**HEAD OFFICE**  
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**Mandatory Flexible Benefit Plan Election Form**

Name: \_\_\_\_\_ Employee Number:

Service Area/Location: \_\_\_\_\_

I hereby elect my Flexible Benefit Plan to be distributed:

Reimbursement Health Spending Account (for Extended Health/Dental Benefits via CoRe Group Benefits)

**Must choose one box**

0%  10%  20%  30%  40%  50%  60%  70%  80%  90%  100%

Direct Contribution to my RRSP (financial institution info below) **OR**

BCGEU Pension Plan **MUST BE ALREADY ENROLLED IN BCGEU PLAN**

**Must choose one box**

100%  90%  80%  70%  60%  50%  40%  30%  20%  10%  0%

**Total must equal 100%**

I understand that this election will continue for future years unless I advise my Employer otherwise in writing no later than November 15<sup>th</sup> annually. Failure to make ANY selection will result in 100% HSA contribution.

Employee Signature: \_\_\_\_\_

Email address: \* \_\_\_\_\_

\* For communication and payment notices

Date: \_\_\_\_\_

<b>RRSP TRANSFER INSTITUTION INFORMATION:</b>	
<b>(NOT REQUIRED IF BCGEU PENSION SELECTED)</b>	
Make cheque payable to: _____	_____
Name of Institution	
Send cheque to: _____	_____
Name of Institution (if different than above)	
Contract or Account Number: _____	_____
Address: _____	_____
_____	Postal Code: _____
Attention (Optional): _____	_____

Sufficient information must be provided for the institution to identify your payment. Since many institutions have central processing units for these payments, the payment may not go directly to your broker or agent. A blank void cheque should be supplied.

**This Form must be returned to Merritt Corporate Office**