| New Chai | k Action : nge: ellation: | | | Temporary NTE Date | | |
|--------------------------------|--|---|--|--|--|--|
| USD | A Agency Na | me and Code (e.g., Agricult | ural Marketing Re | esearch/02: _ | | |
| A. | Applicant Information: | | | | | |
| | Last Nam | e: | First Name: | | MI: | |
| | Home Ad | dress: | | | | |
| | City: | Sta | ite: | Zi | p Code: | |
| | If applicable: Div/UnitRm#/Sub Unit: | | | | | |
| | City: | Sta | ite: | Zij | Zip Code: | |
| | Work Tel | ephone Number: | | | N: | |
| В. | Parking Facility (Please indicate the parking facility you use): | | | | | |
| | Metro Lo Parking N | t Private Meter Other (6) | e Lot explain) | Public | Lot | |
| WAI and n prose admin | RNING: The naking a false ocution under nistrative recording dismissa I certify to I certify to | hat I am employed by the I hat I am eligible for a pre-ta hat the monthly pre-tax par | fication may render Section 1001 Civility iolation, and/or ager Department of Agri ax parking benefit. | the maker so y Penalty Ac ncy disciplination | ubject to criminal tion, providing for ary actions up to and | |
| | | hat my usual <u>monthly</u> parki m Amount under IRS Coo | | | (NTE Authorized | |
| | Employee's Original Signature: | | Date: | | | |
| D. | Transit S | Subsidy Coordinator: | | | | |
| | Name: | | Title: | | | |
| | Signature | · | Date: | | | |
| | Pay Period Parking Benefit Begins: Processed By: Bi-weekly Pre-Tax Benefit Amount: | | | | | |

PRIVACY ACT STATEMENT: This information is solicited under authority of Public Law 101-509. Furnishing the information on this form is voluntary, but failure to do so may result in disapproval of your request for a public transit fare benefit. The purpose of this information is to facilitate timely processing of your request, to ensure your eligibility, and to prevent misuse of the funds involved.

AD-1185 dated 06/04/04