PAYROLL/PERSONNEL

FUTURE BENEFITS ENROLLMENT

UPAY889 (4/00) R1281

TRAN CODE 1 2	EMPLOYEE ID NUMBER 4 12	DATE PREPARED 13 18	EMPLOYEE NAME
FP			

A / D / C 19	BENEFIT TYPE 20	FUTURE PLAN INFO DATA 21 26	FUTURE COV EFF DATE 27 32	FUTURE REASON CODE 33 34

A / D / C 19	BENEFIT TYPE 20	FUTURE PLAN INFO DATA 21 26	FUTURE COV EFF DATE 27 32	FUTURE REASON CODE 33 34

A / D / C 19	BENEFIT TYPE 20	FUTURE PLAN INFO DATA 21 26	FUTURE COV EFF DATE 27 32	FUTURE REASON CODE 33 34

Benefit Type	Plan Info Data
M - Medical	Enter appropriate Medical Plan
D - Dental	Code, Dental Plan Code, Vision Plan Code, or Legal
V - Vision	Plan Code
J - Legal	

PAYROLL OFFICE AUTHORIZATION	
PREPARED BY:	DATE
APPROVED BY:	DATE

RETN: ACCOUNTING: UNTIL ACTION TAKEN