



Middleton–Cross Plains
Area School District
inclusive. innovative. inspiring.

By signing this agreement, Employee agrees to modify his/her salary as indicated below. Employer agrees to contribute this amount on Employee’s behalf to the MCPASD Education Foundation. It is intended that the requirements of all applicable state or federal income tax rule and regulations (Applicable Law) will be met. The Employee understands and agrees to the following:

1. This Salary Reduction Agreement is legally binding and irrevocable with respect to the amounts paid or available while this agreement is in effect;
2. This Salary Reduction Agreement may be terminated at any time for amounts not yet paid or available, and that a termination request is permanent and remains in effect until a new Salary Reduction Agreement is submitted; and

Employee is responsible for determining that the salary reduction does not exceed the limits set for in Applicable Law. Furthermore, Employee agrees to indemnify and hold employer harmless against any and all actions, claims and demands whatsoever that may arise from the contribution made on the Employee’s behalf.

Employee acknowledges that Employer has made no representation and does not have or offer any information to Employee regarding the advisability, appropriateness or tax consequences of the contribution. Nothing herein shall affect the terms of employment between Employer and Employee. This agreement supersedes all prior salary reduction agreements.

My Payroll Contribution Plans:

_____ I would like to contribute \$ _____ from each of my paychecks.

_____ Enclosed is a check to the MCPASD Education Foundation.

Printed Name: _____ **Employee ID#:** _____

Signature: _____ **Date:** _____

Building: _____