

Pemberton Township

Uniform Allowance (Steel Toe Boot) Reimbursement All steps must be completed for reimbursement

Step 1

Date: _____

Employee Name: _____

Department: _____

Bring old worn shoes too your immediate supervisor for review and authorization prior to purchasing "Steel Toe Boots".

"I have reviewed the Steel Toe Boots and find them in need of replacement due to safety reasons. I authorize the above employee to replace these boots.

Supervisor Signature: _____

Step 2

Bring this form to the Safety Coordinator or Administration Staff so a copy can be made prior to your purchase.

Safety Coordinator's Signature: _____ Date: _____

Step 3

After your purchase is completed, bring in an original receipt to the Safety Coordinator for further processing and reimbursement. Any steps not completed will delay your reimbursement.

Amount Paid: _____ (must be an itemized bill)

Employee Name: _____ Date: _____