

## **ORANGE & ROCKLAND**



## SAFETY SHOE REIMBURSEMENT FORM

Tyndale Company Inc. * 5050 Applebutter Road * Pipersville, PA 18947 * 800-356-3433
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*In order to process your boot reimbursement you must:* 

 $\textit{Check if safety boot purchase meets Orange \& Rocklands footwear requirements for job \ classification}$ 

BOOT REQUIREMENT- 6" MINIMUM, EH RATED, ASTM F2413 COMPLIANT (SAFETY TOE), DEFINED HEEL

Employees will be reimbursed up to the purchase price of the boots ( with tax and shipping) or amount of funds available in their account. Employees may request a reimbursment for a lesser amount of the purchase price of the boot.

Provide a copy of the receipt with the completed boot reimbursement form

Supervisors must sign the completed reimbursement form before submitting to Tyndale

This form and copy of the purchase receipt must be emailed to CustomerService@TyndaleUSA.com

or faxed to 215-766-5661

Employee Name:		Employee ID#:	
Telephone#:			
Street Address:			
City:	State:	Zip:	

By signing below, the supervisor acknowledges that the items being requested for reimbursement are in compliance with company policy and the amount requested is approved and in compliance with reimbursement parameters, if available.

Manufacturer:	Description:	
Meets ORU Footwear Requirements:	Cost of Boot:	
Supervisor Name:	Cost Area/Department:	
Supervisor Signature:		

Tyndale will charge a \$15.00 processing fee for boots, to your allowance.

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Amount Reimbursed:

Employee Allowance Balance:

11.1.19 CP