



## CLECO - BOOT REIMBURSEMENT FORM

This form is **ONLY** used for boots purchased outside of the Tyndale Program



Tyndale Company, Inc \* 5050 Applebutter Road \* Pipersville, PA 18947

Employee's Name:	EmpID#:	Today's Date:
E-mail:	Telephone:	

### REQUIRED: MAILING ADDRESS FOR REIMBURSEMENT CHECK

Street Address:		
City:	State:	Zip:

### INFORMATION FOR PROCESSING BOOT REIMBURSEMENT

**The \$20.00 processing fee for purchasing boots outside of the Tyndale Program is PAID BY THE EMPLOYEE and will be deducted from the employee's allowance balance along with the cost of shoe reimbursement.**

**CLECO WILL REIMBURSE UP TO \$200.00**

Eligibility for reimbursement is contingent on the Boot or Shoe purchase meeting the Safety Requirements established by CLECO.

A copy of receipt from Boot or Shoe Purchase **must** be included with this form in order to fulfill the reimbursement request.

Boot Specific information must be filled out - see below.

A Supervisor Signature is required for processing this request (Printed and Signed).

This form and copy of the purchase receipt must be emailed to CustomerService@TyndaleUSA.com or faxed to 215-766-5661.

### BOOT INFORMATION

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

DATE OF PURCHASE: <b>(MUST BE AFTER 1/1/2022)</b>
MANUFACTURER:
DESCRIPTION:
MEETS ASTM F 2413-11 STANDARD & CLECO Footwear Requirements: [ ] YES [ ] NO
COST OF BOOT:

<b>Supervisor Signature Required PRINT:</b>	<b>SIGN:</b>
Supervisor Email:	Supervisor Telephone:

***Tyndale will charge a \$20.00 processing fee for boots not purchased through Tyndale. Employee's Allowance/Reimbursement amount will pay the processing fee.***

### FOR TYNDALE ONLY

PROCESSING FEE: \$20.00
AMOUNT REIMBURSED: <i>*CLECO will only reimburse up to \$200.00</i>
TOTAL AMOUNT TO BE DEDUCTED FROM EMPLOYEE'S ALLOWANCE: