

# STAFF UNIFORM & CLOTHING ALLOWANCE TRACKER

Payroll Division & Human Resources Record

**Employee Name:**

**Employee ID:**

**Department/Role:**

**Fiscal/Allowance Year:**

**Date of Hire:**

**Supervisor/Manager:**

**ANNUAL ALLOWANCE LIMIT**

**TOTAL AMOUNT CLAIMED**

**REMAINING BALANCE**

**Grand Total:**

**Employee Signature**

Date: \_\_\_\_\_

**Department Manager Approval**

Date: \_\_\_\_\_

**HR / Payroll Verification**

Date: \_\_\_\_\_