

WEIGHT WATCHERS REIMBURSEMENT FORM

After completing all required fields, please forward signed form to the Office of Human Resources with receipt copy. The form may be sent via interoffice mail or emailed directly to HR@westernu.edu.

NAME:			
EMPLOYEE ID:	@		
DEPT:			
AMOUNT PAID:			
AMOUNT ELIGIB	LE FOR REIMBURSEMENT	:	
RECEIPT INCLUDED?			
The reimbursement for Weight Watchers membership is a taxable amount and will be paid to you on your next available payroll check. The maximum amount reimbursable is half ($\frac{1}{2}$) of your membership fee.			
WesternU Emplo	yee Signature	Date	
Verified by OHR F	Representative	 Date	