



# IAM/Boeing :: Joint Programs



One application and itemized sales receipt may be submitted for one pair of Safety Shoes per calendar year. *Incomplete applications or duplicate requests will be rejected and returned.*  
*All Applications for previous year must be received by March 1<sup>st</sup> of current year.*

**Itemized Receipt Required** and must include the following: Store Name, date of purchase (Month/Day/Year), shoe description, cost breakdown including taxes.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone #: \_\_\_\_\_

BEMS: \_\_\_\_\_ Total Shoe Cost: \$ \_\_\_\_\_

Work Location:  Everett  Puget Sound  Moses Lake

To be eligible for reimbursement, your shoes must be purchased from one of the following stores listed below. Requests for purchases from other stores will be rejected and returned.

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Danner                | <input type="checkbox"/> Grainger        | <input type="checkbox"/> LaCrosse                  |
| <input type="checkbox"/> Lehigh Safety Shoe Co | <input type="checkbox"/> North 40        | <input type="checkbox"/> Red Wing                  |
| <input type="checkbox"/> Saf-Gard Safety Shoes | <input type="checkbox"/> Shoes for Crews | <input type="checkbox"/> Summit Safety Shoes       |
| <input type="checkbox"/> Whistle Workwear      | <input type="checkbox"/> White's Boots   | <input type="checkbox"/> Willy's Discount Workwear |
| <input type="checkbox"/> Work 'n More          | <input type="checkbox"/> Work World      |  |

### Approved Safety Footwear Criteria

|                         |                    |                          |                |
|-------------------------|--------------------|--------------------------|----------------|
| Anti-static/Dissipative | Metatarsal Guarded | Slip Resistant Soles     | Composite-toed |
| Puncture-Resistant      | Steel-toed         | Chemical Resistant Soles |                |

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Your signature acknowledges you have selected safety footwear appropriate for your work environment from the list of approved safety footwear criteria.*

Submit the completed application and itemized receipt to one of the following:

Email ([IAMBoeingJointProgramsEA@exchange.boeing.com](mailto:IAMBoeingJointProgramsEA@exchange.boeing.com)), drop off at any IAM/Boeing Joint Programs Office, interoffice mail to Joint Programs 11-353, apply online, or mail to IAM/Boeing Joint Programs P.O. Box 3707 MC 11-353 Seattle WA 98124

Rev 1/9/26