

Extra Uniform Order Sheet

- Note: Uniform deductions will be processed around the same time of the month as expenses are put through. (middle of each month)
- The cost will be deducted in the following month for all extra uniforms ordered

Date			
Full Name			
Pharmacy Name			
Pharmacy Address			
Uniform Order	Short Sleeve X _____	Mid Length Sleeve X _____	Tunic Size? _____
Office Use Only	Uniforms Sent <input type="checkbox"/> Uniform Oder Logged for HR <input type="checkbox"/>		

I authorise the payroll department of Allcare Pharmacy Network to deduct €_____ for the payment of _____ uniform (s)

Signed:

Date:
