



Gym Reimbursement Claim Form

Employee Name _____

Employee ID# _____

Item 1

Date of Service _____ (mm-dd-yyyy)

Facility Name _____

Requested Amount _____

Item 2

Date of Service _____ (mm-dd-yyyy)

Facility Name _____

Requested Amount _____

Item 3

Date of Service _____ (mm-dd-yyyy)

Facility Name _____

Requested Amount _____

Employee Certification

By submitting your claim, you're acknowledging that your claim complies with the certifications listed below. It is paid only to NXP employees and hence, the amount will get divided in case of joint/group membership. Employees must be active as of the date the payment is to occur.

Employee's Signature _____ Date _____

I hereby certify that the above information is correct and that the expenses for which I've requested reimbursement, or for which I'm validating:

- Were incurred for services received by me under the plan
- Were for services furnished on or after the date my wellness program took effect
- Haven't been previously reimbursed in any other way or from any other source and won't be submitted for future reimbursement
- Don't include any amounts that are otherwise payable by plans for which I am eligible

Instructions

To have your claim approved, **please sign this form, scan it in and email it as an attachment along with a copy of your claim to hr.helpdesk.amr@nxp.com** with the required documentation.

Subject line: Please include "Gym Reimbursement". Please remember to include your Employee ID at the top of this form and in the title of this document when you save it. **You must email this form from your NXP email address in order for it to be successfully received by the HR Helpdesk Team.**

Eligible expenses: Fitness and sports activities (sports team or league fees), personal training sessions, weight loss and smoking cessation programs including memberships, employee membership fees for gym, fitness center/studio, health club, swim & tennis clubs, fitness and nutrition counseling and Health education-related activities.

Examples of **Non-Eligible** Expenses: Health food or supplements, High-risk sports activities, Locker rental fee, Membership fees for family members, Sports apparel & equipment.

Documentation You'll Need to Provide

It's important that you provide the appropriate receipt with your claim. Employees must submit the payment receipts to claim Gym reimbursement and not the transaction history or bank statement, etc. The receipt must always contain the following and **must be saved in PDF format:**

- Full name of the employee
- Name of service provider or facility
- Date of service
- Description of service
- Total purchase amount