

MINNESOTA
DRIVER'S LICENSE



ONE THAMMAVONG
1533 10TH ST SE #2
ROCHESTER, MN 55904

Date of Birth 08-08-1958
Sex Eyes Class
F BRN D
Height Weight
5-0 120

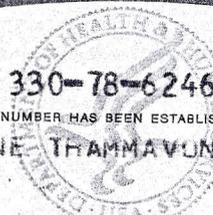
ISSUED 07-2005 EXPIRES 08-08-2009

R178111888516

One Thammavong

FAXED
8/27/07

SOCIAL SECURITY



330-78-6246

THIS NUMBER HAS BEEN ESTABLISHED FOR

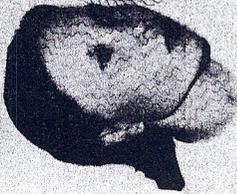
ONE THAMMAVONG

ONE THAMMAVONG
SIGNATURE

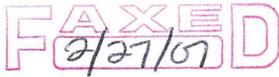
RESIDENT ALIEN

U.S. Department of Justice - Immigration and Naturalization Service

THAMMAVONG, ONE



ONE THAMMAVONG



Employee Information Sheet

(Strictly Confidential)

Date of Hire: 2/23/07

Date of Termination: _____

Rollover/Direct D

First Name/Primer Nombre: One

Middle Name/Segundo Nombre: _____

Last Name/Apellido (Paterno): Thammavong

Address/Domicilio: 1533 10th St. SE #2

City/Ciudad: Rochester State/Estado: MN Zip Code/Código Postal: 55904

Phone No./Número de teléfono: 507 282-2540

Birth Date/Fecha de Nacimiento: 08/08/58

Social Security No./Número de Seguro Social: 330-78-6246

Ethnic ID/Identificación étnica: White, Black, *Cambodian*, Hispanic, Sudanese

Gender/Género: Female/Mujer XX Male/Hombre _____

Marital Status/Estado Civil: Married/Casado/a _____ Single/Soltero/a _____

To be completed by CMG:

Salary: (Hourly) \$7.50 **8.00 9/10/07*

WC Code: 6504 Dept/Shift R-2 Employee No.: 1160

Function: (Manufacturing, Production, Finance, Human Resources)

Type of ID, No/Expiration Date: MN License #R178111888516 EXP 08/08/09

Emergency Contact Information/Información de pariente en caso de emergencia

Name/Nombre: Kien Khammanh

Address/Domicilio: 4608 Manor Brook Dr. NW

Phone No./Número de teléfono: 507-252-8316