

NEW HIRE REPORT

Name: _____ Birthdate: _____

Address _____

Social Security # _____

Employer: Sound Native Plants, PO Box 7505, Olympia, WA 98507-7505 FEIN: 91-1936293

Fax to: 1-800-782-0624

NEW HIRE REPORT

Name: _____ Birthdate: _____

Address _____

Social Security # _____

Employer: Sound Native Plants, PO Box 7505, Olympia, WA 98507-7505 FEIN: 91-1936293

Fax to: 1-800-782-0624

C:\SNP\PERSONNEL\Forms\NEWHIRE.DOC

Z:\PERSONNEL\Forms\all new hires\NEWHIRE.DOC