


&gt;

<b>Public Health</b> Seattle & King County <b>Washington State Food Worker Card</b>		
(signature) <b>WILLIAM WOLFTAIL-WELLS</b>		
	Valid from <b>01/14/2022 to 01/14/2024</b>	
<b>Health Officer</b> Public Health Seattle & King County	<b>1117W32DMT601W24</b>	

```
===== TRANSACTION RECORD
=====
WA FOOD WORKER CARD
3629 S D ST MAILSTOP 006
TACOMA, WA 98418
United States
WWW.TPCHD.ORG

TYPE: Purchase

ACCT: Mastercard          $ 10.00
USD

CARDHOLDER NAME : William J Wolftail-
Wells
CARD NUMBER      : #####4456
DATE/TIME        : Jan 14, 2022
09:01:37
REFERENCE #      : 001 0328779 M
AUTHOR. #        : 249645
TRANS. REF.      : C1A7713

Approved - Thank You

Please retain this copy for your
records.

Cardholder will pay above amount to
card issuer pursuant to cardholder
agreement.
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