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

<p>===== TRANSACTION RECORD =====</p> <p>WA FOOD WORKER CARD 3629 S D ST MAILSTOP 006 TACOMA, WA 98418 United States WWW.TPCHD.ORG</p> <p>TYPE: Purchase</p> <p>ACCT: Mastercard \$ 10.00 USD</p> <p>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</p> <p>Approved - Thank You</p> <p>Please retain this copy for your records.</p> <p>Cardholder will pay above amount to card issuer pursuant to cardholder agreement.</p> <p>=====</p>
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