

RAIN - SOFT WATER
PURE SOAP

STARLIGHT LAUNDRY

SANITARY SERVICE
SINCE 1901

MEMBER OF SAN FRANCISCO
LAUNDRY OWNERS ASSOC. INC.

784 STANYAN STREET
SAN FRANCISCO

BAYVIEW 0798

Name in full *KIYOICHI ABE MURAKAMI*
Permanent address

Nearest relative or friend in case of emergency

Name *Mr. M. Hara.*
Address *1315 Eddy St.*
City *S.F.*

What relation? *friend*

Where last employed *New City Laundry... S.F.*
Mr. Nishimoto.

How Long *About 2 years.*

Kind of work you were doing *Presser.*

Salary paid there *70. Dollar a month.*

Reason for leaving

BIRTHDATE: DAY, MONTH, YEAR *Feb. 12. 1918*

PLACE OF BIRTH *Bakersfield Calif*

SOCIAL SECURITY NUMBER

DRAFT CLASSIFICATION

I affirm that the above information is correct and also understand and agree to comply with the State and Federal ruling concerning contributions in taxes from my wages according to law.

I understand my working hours to be regularly from 7:30 AM until 6:00 PM each week day and Saturday and other hours should the work or occasion require it, unless a holiday is declared for the day or portion thereof, by the employers, the Starlight Laundry.

I will give two week's notice and/or stay until a suitable person takes my place at work when I decide to leave.

11/18 - 1941
first day of work

Kiyochi Abe Murakami
signature

Starlight Laundry asks you to report at once, all or any accidents or injuries, or illnesses to yourself or others, so that if needed, First Aid or medical attention can be given at once.