

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

ORIGINAL FORM

NAME IN FULL *FRANK YOSHIKI SAKO*

PERMANENT ADDRESS *786 - STANYAN ST., LOCAL*

NEAREST RELATIVE IN CASE OF EMERGENCY *MRS. H. SHINTANI*
THEIR ADDRESS *1317 A - FOURTH ST. SACTO.*

WHAT RELATION? *COUSINS.*

WHERE LAST EMPLOYED *TITURAI BROS.*
HOW LONG *FIVE MONTH*
KIND OF WORK YOU WERE DOING *DRIVING.*
REASON FOR LEAVING *FAMILY SITUATION*

BIRTHDATE: MONTH, DATE, YEAR

AGE *23.*

October 2ND, 1917.
PLACE OF BIRTH:

Honolulu, T. H.
SOCIAL SECURITY NUMBER: [REDACTED]

I AFFIRM THAT THE ABOVE INFORMATION TO BE CORRECT AND ALSO UNDERSTAND AND AGREE TO COMPLY WITH THE STATE AND FEDERAL RULING CONCERNING CONTRIBUTIONS IN TAXES DEDUCTED FROM MY WAGES ACCORDING TO LAW.

I UNDERSTAND MY WORKING HOURS TO BE FROM 7:30 AM TO 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 STARLIGHT LAUNDRY, THE EMPLOYERS.

April 11, 40
date signed

Frank Y. Sako SEAL
signature

Starlight Laundry asks you to please report at once all accidents and illnesses.