

_	ID No:	<del></del>
	Signature	-

Name:
Dept:
Position:

SSS No:		
TIN No:		
Date Hired:		
Person to be notified in case of Emergency		
Name:		
Address:		
Contact No.		

## **Authorized Signature**

## IF FOUND PLEASE RETURN TO

## 國富印刷包裝股份有限公司

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