1130 M		STATE OF WASHINGTON EMERGENCY WORKER IDENTIFICATION CARD	
Name:			
Is a registered Emergency Worker of:			
Department:			
Authorizing Signature:			
Date Issued:	Date Expired:		Card No.:
EMD-025 (7/06) (Front)			

1 STATE - 1 STAT		STATE OF WASHINGTON EMERGENCY WORKER IDENTIFICATION CARD	
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Date Issued:	Date Expired: Card No.:		Card No.:
EMD-025 (7/06) (Front)			

1000		STATE OF WASHINGTON EMERGENCY WORKER IDENTIFICATION CARD	
Name:			
ls a	registered Eme	ergency Worke	er of:
Department:			
Authorizing Signature:			
Date Issued:	Date Expired:		Card No.:
EMD-025 (7/06) (Front)			

See Assessment of the		STATE OF WASHINGTON EMERGENCY WORKER IDENTIFICATION CARD	
Name:			
Is a registered Emergency Worker of:			
	registered Erri	ergency work	el UI.
Department:			
Authorizing Signature:			
Date Issued:	Date Expired: Card No.:		Card No.:
EMD-025 (7/06) (Front)			

Photograph	Birthdate:		
	Weight:	Height:	
	Color Hair:	Color Eyes:	
or Right Index Fingerprint			
Emergency Worker Assignment (WAC 118-04):			
Bearer's Signature:			
EMD-025 (7/06) (Back)			

Photograph	Birthdate:		
	Weight:	Height:	
	Color Hair:	Color Eyes:	
or Right Index Fingerprint			
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EMD-025 (7/06) (Back)			

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