



Driver/Employee Update List

DID YOU HIRE A NEW EMPLOYEE? DID AN EMPLOYEE LEAVE?
PLEASE LET US KNOW.

FILL OUT THIS FORM AND SEND IT IN. KEEP YOUR DRIVER LIST UPDATED

- Northwest Employer Consortium (NEC)**
- Professional Independent Trucker's Association (PITA)**
- Other or Company List**

Today's Date: _____ Effective Date for Changes _____

My Company Name: _____

My Name: _____

My Phone Number: _____

Driver Name	Social Security #	Date of Birth	Add	Delete

Instructions:

Please fill out this form whenever you have changes to your driver roster. Keep a copy for yourself. You may **fax** or **mail** this form to HealthWorks Northwest. Your changes will be effective the **NEXT** month.

Our Fax Number Is: 360.575.1460

Our Mailing Address Is: HealthWorks Northwest, Inc.
PO Box 2430
Longview, WA 98632

Any questions? Call us! Our number is 360.578.2527