

NISHNAWBE - ASKI^{ENTERED} APR 1 8 2019 Legal Services Corporation

Employee Information

1. Personal I	nformation					
Full Given Name:	Sitch Last	401	First		M Initial.	
Address:	#53 PARMACHEE Street Address	NE RE	SERVE		1006 Box #	
	NIPIGON City/Town			ON Province	POT 2TO Postal Code	
Home Phone:	1807,887.4175	_ Alternate Pho	ne: (807)	1627.	7698	
Primary Email:	hsitch @ than	Hel.no	et			
SSN#:	456.186.568	Status #	19300	6190) (
2. Job Inform	nation					
Title:	Travel Claims Office	Employee ID:				
Supervisor:	Tara Thompson	Department:		on		
Work Location:	Thunder Buy	Work Email:	hsit	chan	ignleyal. or	1-00
Work Phone:	(80) 6000-14/3	Cell Phone:	(807)	a27	7698	
Start Date:	Sept 4/18	Benefits	YOS	Pensior	1: Y/N 105	
Term Date:		Salary:	\$	15,50	00-	
3. Emergenc	y Contact Information					
Full Name:	Sitch	Greg			A	
	Last	J	First		M Initial.	
Address:	Street Address				Box #	
				ON		
	City/Town			Province	Postal Code	
Primary Phone:	(807) 889-1208	_ Alternate Pho	one: <u>(807</u>	1887.	4358	
Relationship:	AUSBAND					