

Position Applied For _____

Date _____

MSRE Application for Employment

(Pre-Employment Questionnaire)

We are an equal opportunity employer, dedicated to a policy of non-discrimination. Employment is based upon qualification, without regard to race, sex, religion, marital status, color, age, or national origin and status with regard to public assistance. We will make every effort to place the handicapped in suitable positions.

PLEASE COMPLETE ALL INFORMATION EVEN IF INCLUDED IN YOUR RESUME.

PERSONAL DATA (Please type or print)

Last Name	First Name	Middle Initial
Present Address:	Number/Street	City State Zip Telephone
Secondary Address:	Number/Street	City State Zip
Other Name(s) by which applicant is known to references if different from present name:		Do you have any relatives working here? __Yes __No If yes, Name(s) & Relationship(s):
Wage Desired:	When are you available to start working?	Please state age if under 18:
How did you hear of us? <input type="checkbox"/> Advertising <input type="checkbox"/> Person _____ <input type="checkbox"/> Other _____		
Please check the positions you are interested in: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Either		Please circle days and hours you are available for work: SU M TU W TH F S Mornings Afternoons Evenings All
Are you authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, proof of identity and employment eligibility will be required upon beginning employment.		

EDUCATION: Education is a criterion that the company may utilize in determining whether or not an applicant is qualified.

Name and Location of School	Degree or Certification Received	Course of Major/Minor Subjects	No. of Years Attended
High School (or G.E.D.)			
College or University			
Business, Trade or Technical Schools			
Military Service Schools			

Please account for all periods of employment. Start with your most recent position and include military service. You may attach a resume to supplement information, but application must be completed in full.

WORK EXPERIENCE

NAME OF EMPLOYER		Address	City	State	Zip	Telephone
Date Started	Starting Position			May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Date Ended	Present (Last) Position					
Name and title of present (Last) Supervisor		Reason for Leaving?				
Brief description of your responsibilities (Include number of employees you supervised, if applicable)						

NAME OF EMPLOYER		Address	City	State	Zip	Telephone
Date Started	Starting Position			May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Date Ended	Present (Last) Position					
Name and title of present (Last) Supervisor		Reason for Leaving?				
Brief description of your responsibilities (Include number of employees you supervised, if applicable)						

NAME OF EMPLOYER		Address	City	State	Zip	Telephone
Date Started	Starting Position			May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Date Ended	Present (Last) Position					
Name and title of present (Last) Supervisor		Reason for Leaving?				
Brief description of your responsibilities (Include number of employees you supervised, if applicable)						

WORK EXPERIENCE (continued)

NAME OF EMPLOYER	Address	City	State	Zip	Telephone
Date Started	Starting Position		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Date Ended	Present (Last) Position				
Name and title of present (Last) Supervisor	Reason for Leaving?				
Brief description of your responsibilities (Include number of employees you supervised, if applicable)					

NAME OF EMPLOYER	Address	City	State	Zip	Area Code/Telephone
Date Started	Starting Position		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Date Ended	Present (Last) Position				
Name and title of present (Last) Supervisor	Reason for Leaving?				
Brief description of your responsibilities (Include number of employees you supervised, if applicable)					

NAME OF EMPLOYER	Address	City	State	Zip	Area Code/Telephone
Date Started	Starting Position		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Date Ended	Present (Last) Position				
Name and title of present (Last) Supervisor	Reason for Leaving?				
Brief description of your responsibilities (Include number of employees you supervised, if applicable)					

BUSINESS REFERENCES

Name	Address	Phone
1.		
2.		
3.		

APPLICANT: Please read carefully and sign.

I affirm that the information provided is true and complete and that I have not withheld any fact(s). Any misrepresentation, falsification, omission or derogatory information that is discovered may prevent my being hired, or if hired, may subject me to disciplinary action, up to and including immediate employment dismissal.

I authorize MSRE Management, LLC and its agents to conduct an investigation and verification of all statements and information contained in this application that they may deem relevant to evaluating my qualifications for employment. I authorize all my previous employers or other persons having information concerning me or my record of employment to report such information. I release each such person, employer or its agents from all claims and liability whatsoever arising out of such an investigation and disclosure of my background.

I understand that the company to which I am applying for employment will seek to keep all such information confidential except where such information is required to be released by law.

Upon receiving a conditional offer of employment by this company, I agree to submit to a physical examination and/or testing for illegal drugs by a doctor or facility designated by and at the expense of the company. I also agree to submit to testing for alcohol and/or illegal drugs if requested at subsequent intervals as the company may direct during the course of my employment. I understand that refusal to submit to such testing may result in my dismissal. I agree to permit collection of urine, blood, saliva, hair and/or other samples from me to conduct this testing to determine the presence or use of alcohol and/or drugs. Further, I agree to the release of drug test results and other relevant medical information to authorized representatives of the company. I also understand that my employment is contingent upon passing such testing.

I understand that this is an application for employment and that no employment contract is being offered. I also understand that, if offered employment, I will be an at-will employee which means that my employment can be terminated at any time for any reason, with or without notice, at the option of either the company or myself, and that no representative of the company has any authority to make any representation to the contrary.

I have read, understand and agree to the above.

Authorization signature of applicant

Date

AUTHORIZATION FOR RELEASE OF CONSUMER INFORMATION

Information Regarding Individual Rights

I understand that as part of my application for employment, or qualification for promotion, reassignment or retention MSRE Management, LLC and its agents may conduct a background investigation including the acquiring of information contained in a consumer report and/or an investigative consumer report. The information in these reports may include, but is not limited to:

- Verification of Social Security Number
- Verification of current and previous residences
- Employment history
- Education
- Character references, including personal interviews
- Credit history and reports
- Criminal history records from any criminal justice agency in any or all federal, state county jurisdictions
- Motor vehicle records to include traffic citations and registration, and
- Any other public records

The Fair Credit Reporting Act as amended by the Consumer Reporting Reform Act of 1996 and the Fair and Accurate Credit Transactions Act of 2003 requires that I be advised that any information contained in a consumer and/or an investigative consumer report acquired by employers or prospective employers will be used only for the purposes of employment and may not be disclosed to any other person or entity, except as required by law. I also understand that, to the extent such investigation includes information bearing on my character, general reputation, personal characteristics or mode of living, I may request a complete and accurate disclosure of the nature and scope of the background verification.

Authorization

I hereby authorize any party or agency contacted to furnish the above mentioned information and I release each such person, employer or its agents from all claims and liability whatsoever arising out of such an investigation and disclosure of my background. This authorization and consent shall be valid in original, fax, or copy form.

Authorization Signature

Date

Information Required for Background Checks

The following information is required by law enforcement agencies and other entities for identification purposes when checking records. It is confidential and will not be used for any other purpose, except as required by law.

Print Full Name

Social Security Number

Print Other Names You Have Used

Dates Used (If Applicable)

Address (Building Number, Street, Unit, City, State and Zip Code)

Current Driver's License Number(s)

Issuing State

Other Driver's License Number(s)

Issuing State


Driving Record Release of Interest

Employers, prospective employers, volunteer organizations, or their agent can get driving records for an employee, prospective employee, or volunteer when authorized. Use this form to get their authorization.

- Complete the Company section.
- Give this form to your employee, prospective employee, or volunteer to complete their section.
- For audit purposes, keep this completed form in your files for at least two years. Do not mail it to the Department of Licensing.

Sealed juvenile records. Information contained in a driving record related to a sealed juvenile record may not be used for any purpose unless required by federal law. The employee or prospective employee may furnish a copy of the court order sealing the juvenile record to the employer, prospective employer, or their agent.

Company – To be completed by the company or the agent of the company

PRINT or TYPE Company name MSRE Management, LLC	
Agent company name (if applicable)	
Company/Agent company address 1000 Second Avenue, Suite 1800 Seattle, WA 98104	
Authorized representative name Matt Alisch	Title Controller
Answer the following	
1. Is this company an employer, prospective employer, or volunteer organization of the individual whose driving record is being requested? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
2. Is the record you are requesting necessary for employment purposes related to driving by the employee or prospective employee as a condition of employment or related to driving by the volunteer at the direction of the volunteer organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
3. Do you agree to use the information contained in the record exclusively for this purpose and not divulge it to a third party? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
4. Do you agree to hold harmless the Washington State Department of Licensing for all matters relating to the release of the requested driving record? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Certification <i>I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.</i>	
- Seattle, WA	X 
Date and place signed	Authorized representative signature

Employee, prospective employee, or volunteer – Complete this section and return the form to the company

PRINT or TYPE Full name (First, Middle, Last) of employee/prospective employee/volunteer	Date of birth (mm/dd/yyyy)	WA driver license number
Authorization from		
<input type="checkbox"/> Employee – for release of my driving record for employment purposes, at my employer's discretion for the full term of my employment		
<input checked="" type="checkbox"/> Prospective employee – for release of my driving record for employment purposes, not to exceed 30 days from date signed		
<input type="checkbox"/> Volunteer – for release of my driving record for a position applied for that requires me driving at the direction of the volunteer organization		
Employer, prospective employer, or volunteer organization name MSRE Management, LLC		
Employer agent company name if acting on behalf of the company for employment purposes		
Authorization <i>I am an employee, prospective employee, or volunteer of the company named above and I request that a copy of my Washington State driving record be sent to them/their agent.</i>		
X		
Signature		Date

**[IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION]
DISCLOSURE REGARDING BACKGROUND INVESTIGATION**

MSRE Management, LLC. _____ (“the Company”) may obtain information about you for employment purposes from a third party consumer reporting agency. Thus, you may be the subject of a “consumer report” and/or an “investigative consumer report” which may include information about your character, general reputation, personal characteristics, and/or mode of living and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records (“driving records”), verification of your education or employment history, or other background checks. Credit history will only be requested where such information is substantially related to the duties and responsibilities of the position for which you are applying. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report, to request a written summary of your rights under federal law. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by CREDENTIAL CHECK CORPORATION, 575 East Big Beaver Road, Suite 300, Troy, Michigan 48083-1300, 888-689-2000, or another outside organization. The scope of this notice and authorization is all-encompassing, however, allowing **Company** to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

New York and Maine applicants or employees only: You have the right to inspect and receive a copy of any investigative consumer report requested by **Company** by contacting the consumer reporting agency identified above directly. You may also contact the Company to request the name, address and telephone number of the nearest unit of the consumer reporting agency designated to handle inquiries, which the Company shall provide within 5 days.

New York applicants or employees only: Upon request, you will be informed whether or not a consumer report was requested by **Company**, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. By signing below, you also acknowledge receipt of Article 23-A of the New York Correction Law.

Oregon applicants or employees only: Information describing your rights under federal and Oregon law regarding consumer identity theft protection, the storage and disposal of your credit information, and remedies available should you suspect or find that the Company has not maintained secured records is attached.

Washington State applicants or employees only: You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

CCC-CSD0001-120110-A

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the Company at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by CREDENTIAL CHECK CORPORATION, 575 East Big Beaver Road, Suite 300, Troy, Michigan 48083-1300, 888-689-2000, another outside organization and/or **Company** itself. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

Minnesota and Oklahoma applicants or employees only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

California applicants or employees only: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law.

PLEASE PRINT

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(First) (Middle) (Last) (Maiden Name or Alias)

Current Address:

City	State	Zip
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Utah applicants or employees: Please do not provide your Date of Birth, Driver's License Number, or Social Security Number at this time. Such information may be requested upon a conditional offer of employment or at the time the background check will be run.

Date of Birth*		Social Security Number*	
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Driver's License Number	State Issued
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Applicant's Signature	Date:
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*This information will be used for background screening purposes only and will not be used as hiring criteria.



**NOTICE REGARDING BACKGROUND
INVESTIGATION
PURSUANT TO CALIFORNIA LAW**

**NOTICE REGARDING BACKGROUND INVESTIGATION
PURSUANT TO CALIFORNIA LAW**

_____ (the "Company") intends to obtain information about you for employment purposes from a consumer reporting agency. Thus, you can expect to be the subject of "investigative consumer reports" and "consumer credit reports" obtained for employment purposes. Such reports may include information about your character, general reputation, personal characteristics and mode of living. With respect to any investigative consumer report from an investigative consumer reporting agency ("ICRA"), the Company may investigate the information contained in your employment application and other background information about you, including but not limited to obtaining a criminal record report, verifying references, work history, your social security number, your educational achievements, licensure, and certifications, your driving record, and other information about you, and interviewing people who are knowledgeable about you. The results of this report may be used as a factor in making employment decisions. The source of any investigative consumer report (as that term is defined under California law) will be CREDENTIAL CHECK CORPORATION, 575 East Big Beaver Road, Suite 300, Troy, Michigan 48083-1300, and 888-689-2000. The source of any credit report will be CREDENTIAL CHECK CORPORATION, 575 East Big Beaver Road, Troy, Michigan 48083-1300, 888-689-2000. The Company agrees to provide you with a copy of an investigative consumer report when required to do so under California law.

Under California Civil Code section 1786.22, you are entitled to find out from an ICRA what is in the ICRA's file on you with proper identification, as follows:

- In person, by visual inspection of your file during normal business hours and on reasonable notice. You also may request a copy of the information in person. The ICRA may not charge you more than the actual copying costs for providing you with a copy of your file.
- A summary of all information contained in the ICRA's file on you that is required to be provided by the California Civil Code will be provided to you via telephone, if you have made a written request, with proper identification, for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or charged directly to you.
- By requesting a copy be sent to a specified addressee by certified mail. ICRAs complying with requests for certified mailings shall not be liable for disclosures to third parties caused by mishandling of mail after such mailings leave the ICRAs.

"Proper Identification" includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. Only if you cannot identify yourself with such information may the ICRA require additional information concerning your employment and personal or family history in order to verify your identity.

The ICRA will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information contained in files maintained on you. This written explanation will be provided whenever a file is provided to you for visual inspection.

You may be accompanied by one other person of your choosing, who must furnish reasonable identification. An ICRA may require you to furnish a written statement granting permission to the ICRA to discuss your file in such person's presence.

CREDENTIAL CHECK CORPORATION®

575 East Big Beaver Road, Suite 300, Troy, Michigan 48083-1300 USA Tel:(888) 689-2000 Fax:(877) 689-1500 www.credentialcheck.com

**LICENSURE AND EMPLOYMENT OF PERSONS PREVIOUSLY
CONVICTED OF ONE OR MORE CRIMINAL OFFENSES****Section 750. Definitions.****751. Applicability.****752. Unfair discrimination against persons previously convicted of one or more criminal offenses prohibited.****753. Factors to be considered concerning a previous criminal conviction; presumption.****754. Written statement upon denial of license or employment.****755. Enforcement.****§750. Definitions.**

For the purposes of this article, the following terms shall have the following meanings:

- (1) "Public agency" means the state or any local subdivision thereof, or any state or local department, agency, board or commission.
- (2) "Private employer" means any person, company, corporation, labor organization or association which employs ten or more persons.
- (3) "Direct relationship" means that the nature of criminal conduct for which the person was convicted has a direct bearing on his fitness or ability to perform one or more of the duties or responsibilities necessarily related to the license, opportunity, or job in question.
- (4) "License" means any certificate, license, permit or grant of permission required by the laws of this state, its political subdivisions or instrumentalities as a condition for the lawful practice of any occupation, employment, trade, vocation, business, or profession. Provided, however, that "license" shall not, for the purposes of this article, include any license or permit to own, possess, carry, or fire any explosive, pistol, handgun, rifle, shotgun, or other firearm.
- (5) "Employment" means any occupation, vocation or employment, or any form of vocational or educational training. Provided, however, that "employment" shall not, for the purposes of this article, include membership in any law enforcement agency.

§751. Applicability.

The provisions of this article shall apply to any application by any person for a license or employment at any public or private employer, who has previously been convicted of one or more criminal offenses in this state or in any other jurisdiction, and to any license or employment held by any person whose conviction of one or more criminal offenses in this state or in any other jurisdiction preceded such employment or granting of a license, except where a mandatory forfeiture, disability or bar to employment is imposed by law, and has not been removed by an executive pardon, certificate of relief from disabilities or certificate of good conduct. Nothing in this article shall be construed to affect any right an employer may have with respect to an intentional misrepresentation in connection with an application for employment made by a prospective employee or previously made by a current employee.

§752. Unfair discrimination against persons previously convicted of one or more criminal offenses prohibited.

No application for any license or employment, and no employment or license held by an individual, to which the provisions of this article are applicable, shall be denied or acted upon adversely by reason of the individual's having been previously convicted of one or more criminal offenses, or by reason of a finding of lack of "good moral character" when such finding is based upon the fact that the individual has previously been convicted of one or more criminal offenses, unless:

- (1) There is a direct relationship between one or more of the previous criminal offenses and the specific license or employment sought or held by the individual; or
- (2) the issuance or continuation of the license or the granting or continuation of the employment would involve an unreasonable risk to property or to the safety or welfare of specific individuals or the general public.

§753. Factors to be considered concerning a previous criminal conviction; presumption.

1. In making a determination pursuant to section seven hundred fifty-two of this chapter, the public agency or private employer shall consider the following factors:
 - (a) The public policy of this state, as expressed in this act, to encourage the licensure and employment of persons previously convicted of one or more criminal offenses.
 - (b) The specific duties and responsibilities necessarily related to the license or employment sought or held by the person.
 - (c) The bearing, if any, the criminal offense or offenses for which the person was previously convicted will have on his fitness or ability to perform one or more such duties or responsibilities.
 - (d) The time which has elapsed since the occurrence of the criminal offense or offenses.
 - (e) The age of the person at the time of occurrence of the criminal offense or offenses.
 - (f) The seriousness of the offense or offenses.
 - (g) Any information produced by the person, or produced on his behalf, in regard to his rehabilitation and good conduct.
 - (h) The legitimate interest of the public agency or private employer in protecting property, and the safety and welfare of specific individuals or the general public.
2. In making a determination pursuant to section seven hundred fifty-two of this chapter, the public agency or private employer shall also give consideration to a certificate of relief from disabilities or a certificate of good conduct issued to the applicant, which certificate shall create a presumption of rehabilitation in regard to the offense or offenses specified therein.

§754. Written statement upon denial of license or employment.

At the request of any person previously convicted of one or more criminal offenses who has been denied a license or employment, a public agency or private employer shall provide, within thirty days of a request, a written statement setting forth the reasons for such denial.

§755. Enforcement.

1. In relation to actions by public agencies, the provisions of this article shall be enforceable by a proceeding brought pursuant to article seventy-eight of the civil practice law and rules.
2. In relation to actions by private employers, the provisions of this article shall be enforceable by the division of human rights pursuant to the powers and procedures set forth in article fifteen of the executive law, and, concurrently, by the New York city commission on human rights.

Below is a summary of your rights under Oregon law,
as required by Oregon's Credit History Anti-Discrimination Act.

1. Identity Theft Protection Act

The Oregon Consumer Identity Theft Protection Act, Or. Rev. Stat. §§ 646A.600 *et seq.* provides you with the following protections:

a. Security Freeze

- All Oregonians can place a security freeze on their credit file maintained by a credit reporting agency, such as Equifax, Experian, or TransUnion. A security freeze means that your file cannot be shared with potential creditors. Most businesses will not open credit accounts without first checking a consumer's credit history. There is no fee if you are a victim of identity theft or you have reported the theft of their personal information to a law enforcement agency. For other consumers, each credit reporting agency will charge a fee of \$10 - a total of \$30 to freeze your files.
- If you do place a security freeze on your report you can "thaw" their file to apply for new credit. Law enforcement agencies and government agencies including child support and businesses collecting existing debt still will be able to access your credit file.

b. Notification of a Breach

- Anyone (business, organization, or individual) who maintains personal information of Oregon consumers will be required to notify his or her customers if computer files containing that personal information have been subject to a security breach.
- The notification must be done as soon as possible unless law enforcement believes the notification will impede a criminal investigation. In most cases you can notify in writing, but the law allows for electronic notice if this is the primary manner of communication between you and the consumer, or telephone notice if you contact the person directly. If you demonstrate the cost of notification is more than \$250,000 or the number of individuals to be notified is more than 350,000, you may notify through major Oregon television and newspaper media.
- If an investigation into the breach by a Federal, state or local law enforcement agency determines there is no reasonable likelihood of harm to consumers, notification is not required. The same is true if the data involved in the breach was encrypted or made unreadable.
- Note: A business or organization that is subject to and complies with the Gramm-Leach-Bliley Act's notification requirements do not need to develop a further process. However, if the breach involves your employees, you must follow Oregon's notification requirements.

c. Protection of Social Security Numbers

- You are especially vulnerable to identity theft if your Social Security number has fallen into the wrong hands. The law prohibits anyone from printing Social Security numbers on cards or documents or publicly displaying or posting a Social Security number. This doesn't apply to the use of SSNs for internal verification purposes. The law allows an exception for records that are required by law to be made available to the public or filed with courts.

d. Safeguarding personal information

- If your personal information is collected by the Company, such as driver's license numbers or Social Security numbers, the Company must develop, implement and maintain reasonable safeguards to protect the security and confidentiality of the information. This also includes the proper disposal of information.

2. Disposal and Storage of Your Credit Information

Below are protections you have—under Oregon law—regarding the disposal and storage of your credit information:

- The Company will comply with state and federal privacy laws, including—if applicable—the Oregon Consumer Identity Theft Protection Act (ORS 646A.600 – 646A.628), the Fair Credit Reporting Act (15 U.S.C. §§ 1681 *et seq.*), Health Insurance Portability and Accountability Act (HIPAA) of 1996 (P.L.104-191), and the Americans with Disabilities Amendments Act of 2008 (P.L. 110-325).

- The Company will collect and maintain credit history information on separate forms and in separate files to be treated as confidential records, except that officers and employees of the division investigating compliance with credit history discrimination laws must be provided relevant information on request.
- The Company will not use credit information about you for a purpose other than to determine whether or not the employer will hire you as an employee; or provide information about your credit history to a person other than the employer.

Remedies

The following remedies may be available to you, under Oregon law, should you suspect that the Company has not maintained secure records in the manner required under Oregon law:

- The Director of the Department of Consumer and Business Services may:
 - Make such public or private investigations to determine whether a person has violated any provision of the Oregon Consumer Identity Theft Protection Act;
 - Require or permit a person to file a statement in writing as to all the facts and circumstances concerning the matter to be investigated.
 - Administer oaths and affirmations, subpoena witnesses, compel attendance, take evidence and require the production of books, papers, correspondence, memoranda, agreements or other documents or records that the director deems relevant or material to the inquiry.
- If a person fails to comply with a subpoena so issued or a party or witness refuses to testify on any matters, the judge of the circuit court or of any county shall compel obedience by proceedings for contempt as in the case of disobedience of the requirements of a subpoena issued from such court or a refusal to testify therein.
- If the director has reason to believe that any person has engaged or is engaging in any violation of the Consumer Identity Theft Protection Act, the director may issue an order, directed to the person to cease and desist from the violation, or require the person to pay compensation to consumers injured by the violation. The director may order compensation to consumers only upon a finding that enforcement of the rights of the consumers by private civil action would be so burdensome or expensive as to be impractical.
- In addition to all other penalties and enforcement provisions provided by law, any person who violates or who procures, aids or abets in the violation of the Consumer Identity Theft Protection Act shall be subject to a penalty of not more than \$1,000 for every violation, which shall be paid to the General Fund of the State Treasury.
 - Every violation is a separate offense and, in the case of a continuing violation, each day's continuance is a separate violation, but the maximum penalty for any occurrence shall not exceed \$500,000.
- The Company's duties and obligations under Oregon's Credit History Anti-Discrimination Act extend to a successor employers;
- If your rights under the Credit History Anti-Discrimination Act have been violated, you may file a complaint with the Civil Rights Division of the Bureau of Labor and Industries;
- It is an unlawful employment practice for the Company to retaliate or in any way discriminate against you with respect to hiring, tenure or any other term or condition of employment because you have invoked any provision of the Credit History Anti-Discrimination Act.
- It is an unlawful employment practice for a covered employer to discharge, expel or otherwise discriminate against you because you have filed a complaint, testified or assisted in any proceeding in connection with the Credit History Anti-Discrimination Act.
- It is an unlawful employment practice for any person, whether an employer or an employee, to aid, abet, incite, compel or coerce the doing of any of the acts in violation of Oregon's Credit History Anti-Discrimination Act, or to attempt to do so.

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identify theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed

or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:

- 1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.
- b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:

2. To the extent not included in item 1 above:
 - a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks
 - b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act
 - c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations
 - d. Federal Credit Unions
3. Air carriers
4. Creditors Subject to Surface Transportation Board
5. Creditors Subject to Packers and Stockyards Act, 1921
6. Small Business Investment Companies
7. Brokers and Dealers
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above

CONTACT:

- a. Consumer Financial Protection Bureau
1700 G Street NW
Washington, DC 20552
 - b. Federal Trade Commission: Consumer Response Center – FCRA
Washington, DC 20580
(877) 382-4357

 - a. Office of the Comptroller of the Currency
Customer Assistance Group
1301 McKinney Street, Suite 3450
Houston, TX 77010-9050
 - b. Federal Reserve Consumer Help Center
P.O. Box 1200
Minneapolis, MN 55480
 - c. FDIC Consumer Response Center
1100 Walnut Street, Box #11
Kansas City, MO 64106
 - d. National Credit Union Administration
Office of Consumer Protection (OCP)
Division of Consumer Compliance and Outreach (DCCO)
1775 Duke Street
Alexandria, VA 22314
Asst. General Counsel for Aviation Enforcement & Proceedings
Aviation Consumer Protection Division
Department of Transportation
1200 New Jersey Avenue, SE
Washington, DC 20590
Office of Proceedings, Surface Transportation Board
Department of Transportation
395 E Street S.W.
Washington, DC 20423

Nearest Packers and Stockyards Administration area supervisor
- Associate Deputy Administrator for Capital Access
United States Small Business Administration
409 Third Street, SW, 8th Floor
Washington, DC 20416
Securities and Exchange Commission
100 F St NE
Washington, DC 20549
Farm Credit Administration
1501 Farm Credit Drive
McLean, VA 22102-5090
FTC Regional Office for region in which the creditor operates or
Federal Trade Commission: Consumer Response Center – FCRA
Washington, DC 20580
(877) 382-4357