

OKLAHOMA ABSTRACTORS BOARD

LIST OF EMPLOYEES FORM

Company Name _____ County _____ Date _____

Contact Name _____ Contact Phone Number _____

Please provide your list of employees below and attach a copy of your most recent OESC Report (you may mask out the payroll amounts - you are only required to show the listing of all company employees and the last four numbers of their Social Security number). All information is required on this form. Make a copy of this form if more space is needed.

Name	Current Status (circle)	Hire Date	Termination Date	Job Title - Insert No. from attached list	Brief description of duties	if not licensed, provide expected date of testing
	Active Inactive	/ /	/ /			/ /
	Active Inactive	/ /	/ /			/ /
	Active Inactive	/ /	/ /			/ /
	Active Inactive	/ /	/ /			/ /
	Active Inactive	/ /	/ /			/ /
	Active Inactive	/ /	/ /			/ /
	Active Inactive	/ /	/ /			/ /
	Active Inactive	/ /	/ /			/ /
	Active Inactive	/ /	/ /			/ /

JOB TITLE DESCRIPTIONS

1. Abstractor
2. Indexer
3. Escrow Officer
4. Escrow Assistant
5. Owner
6. Manager
7. Attorney
8. Receptionist
9. General Clerk
10. Order Processing Clerk
11. Messenger
12. Janitor
13. _____ (List)