COPY

PERSONNEL STATEMENT 1803 MARVIN GRIFFIN ROAD AUGUSTA, GA. 30906

1) Full Name of Applicant: Chao	Tang
2) Home Address: 811 Met Casf	St, Angusta. GA 30904
3) Telephone #: 706284522 SS#:	Date of Birth
High School Diploma: Yes V No	or GED: Yes No
4) Trade name of Business of which personne	el statement is a part of: H Relax LLC, DBA
11 Ma 55 000	
5) Business Address: 2045 Centra	1 Avenue, Anguston, GA 30904
6) Business Telephone: 706267792	8
7) Position of Applicant in Business: OW	
Other names used by applicant: maiden nar nicknames	ne, names used in former marriages, alias, stage name and/or
9) Place of Birth: China	U.S. Citizen (V) yes () no
Naturalized: Ye5	Date, Place and Court: Atlanta Georgio
Certification No:	
10) Martial Status: () Married (√) Divorced	() Separated () Widowed () Single
11) If married, divorced, or widowed, complete	
Full name of spouse: Yan Qing 2 hang	Hall SS# 46 24 0 - 614 2
	Weight: Age:
	Color Eyes:
COLOI LIMII	
	. C . IC - If ammigued give delais!

13) Employment Records: (Give most recent experience first. If self-employed, give details)

Fro		To	Year	Occupation and Description of Duties Performed	Salaries Received	Employees	State	Reason for Leaving
Month	Year	Month	1 cai	Dudes I citotines	- ann 1.a	11 Les CHICL	111.1	A MA
01	2025	now		manager	See / Year	Natural Chistal	uvo	
10	2020	now		manager 2	5.000/Year	H Relax LL	C GK	NIA
8	2018	non	,	manager 3	0.000 / Yam	CT Candy 1	IL GA	N/A

14) List in reverse chronological order all of your residence for the past ten years.

From		Street	City	State
Month	Year	SW 0	Angusta	GA
2	2015	3346 Rovenyood Dr	Evans	GA
9	2019	649 Riverson Days Ln	Glans	GA
9	2023	1811 Mentant St	Augusta	GA
10	7024	SIL WESTER TO	1.1.	

,	2	2015	CLZSIV MAYCHAIL WGY	Evans	68				
	9	2019	64384 Marshall Way	Glans	GA				
	9	2023	The state of the s	Augusta	GA				
	10	2024	811 WEPLANT ST	1.5					
				0.11	I				
	15) References: Give three personal references, not relatives, former employers, fellow employees, or								
	15) References:	5) References: Give three personal references, he have business or professional men or women, who have							
	school teachers, who are responsible, reputable, addits, business, address, and number of years								
	KIIOWII YOU WOIL	11	2. DETENDINE FLOW) H	Dalax ILC & 16	Als				
	known you well during the past tive years. (Manny) H Relax LLC & Years known). Jessica Hong (790 Plairie Ln Floors) H Relax LLC & Years Xiang 2hu (527 Vasey Ct. Augusta) CT Cardy LLC & Years								
	In	/ FIT WALRU	/ .T. PINTER TELL CONTROL OF THE PERSON OF T						
	5 hun / 14 6	220 Fast Got	e to Aiken) . TAMM	a company					
	-Arthur								
	16) Military service: (Serial numbers, branch of service, period of service, type of discharge)								
	16) Military service: (Serial numbers, transfer of service, person								
		NIA			,				
				Cant outhor	ities for any				
	17) TT NOV 81	or been arrested.	or held by Federal, State, or other	law enforcement audior	ities, for any				
	17) Have you ev	C. 11 state of	amty or municipal law regulation	or ordinance? (Do not i	nclude traffic				
	violations of any	federal, state, co	or held by Federal, State, or other to outry, or municipal law, regulation of the provincial control of drugs. Such as a second or drugs.	ch as driving under the	influence.) All				
	violations, unless	they are offense	es pertaining to alcohol or drugs, su	ch as throng are held d	ate place				
	other charges mil	et he included ex	es pertaining to alcohol or drugs, surven if they were dismissed: Give re	ason charged of held, d	ate, place				
	omer charges ma	1 dimonition	AILA						
	where charged an	id disposition.	NIA						
				•					
				** **					
	10) Attach truc (2) conies of driv	er's license and or picture I.D. to ap	oplication.					
	18) Attach two (2) copies of and							
			ent, check all answers and explanation	ons to see that you have	answered all				
	Note: Before sign	ning this stateme	ent, check all answers and explanation is to be executed under oath and and shoots submitted herein.	l'ant to the momelties	of folse				
		This stateme	HI IS TO DE EXECUTED MINOR OURS WILL	subject to the penalties	OI Idiso				
	questions correcti	y. This ottoone	ned sheets submitted herein.	_					
	swearing, and it is	ncludes all attach	ied silects sacimited in						
					NAME OF TAXABLE PARTY.				
			VERIFICATION						
		Dial man 1	County						
	State of Georgia	KICKMOND	County						
	,	Tan 9			- of folio				
	Class	Tang	do solemnly swear nswers made by me as the applican	, subject to the penalties	s of faise				
	CVINO	(MIII	made by me as the annlican	t in the forgoing person	nel statement				
	swearing that the	statements and a	nswers made by me as me approxim	· m · · · · · · · · · · · · · · · · · ·					
	are true.								
	are arue.		-/						
			(Man)	long					
			Amplicant's sign	nature (Full name in ink	3)				
			Applicant's sign	lature (1 un manie in manie	,				
		- 1	T		V.				
		at Chas	lang						
	I hereby certify th		mally known to me, that he/she sign	ed his/her name to the	foregoing				
	(the above signed	person) is perso	nally known to me, that he site sign he knew and understood all statemen	to and answers made th	erein and				
	application stating	to me that he/sh	e knew and understood all statemen	its and answers made a	lorom, and				
1110 1110	under oath.								
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"HILLIAM	11.			and the second					