

NEW AMEND

## STATE OF HAWAII DEPARTMENT OF LABOR & INDUSTRIAL RELATIONS DISABILITY COMPENSATION DIVISION

CASE NUMBER	
DATE RECEIVED	

## WC-5A DEPENDENTS' CLAIM FOR WORKERS' COMPENSATION NOTE: COMPLETE THE FILLABLE-DARK SHADED BLOCKS

		DECEDENT'	S INFORMATION - SE	CTION 1				
CLAIMANT NAME - LAST			FIRST				M.I.	SUFFIX
TDENTIFICATION TVDE	TOTALTET CATTON NUMBER	DATE OF THRUDY/TILING	CC CAUCTAC DEATH					
IDENTIFICATION TYPE	IDENTIFICATION NUMBER	DATE OF INJURY/ILLNE	SS CAUSING DEATH					
SSN PASSPORT								
DEATH CERTIFICATE NUMBER	DATE OF DEATH	PLACE OF DEATH						
DEATH CERTIFICATE NOTIBER	DATE OF BEATT	TEACE OF BEATT						
NATURE OF INJURY/ILLNESS CA	USING DEATH					-		
		DECEDENT	''S EMPLOYER - SEC	TION 2				
EMPLOYER NAME								
EMPLOYER ADDRESS				CI	TY	STATE	ZIP COD	Σ
POINT OF CONTACT		DHON	E NUMBER	EM	MAIL ADDRESS			
POINT OF CONTACT		PHON	E NUMBER	EI*	MIL ADDRESS			
		(	) -					
		SIG	NATURE - SECTION	3				
	half of myself and the dep	pendents listed in the	Dependents Secti	on for co	mpensation arising out of the d	eath of the abo	ve-named	
decedent.								
PRINT NAME OF DEPENDENT			SIGNATURE TYPE		SIGNATURE		DATE	
			DEPENDENT					
			REPRESENT	ATIVE				
PHONE NUMBER EI	MAIL ADDRESS				TED BY (ATTORNEY/REPRESENTATIVE)	- PRINT NAME		
					•			
( ) -								
ATTORNEY/REPRESENTATIVE ADD	DECC			CITY		STATE	ZIP COD	nE
ATTORNET/ NEFRESENTALIVE ADD	ענשווי			CITY		SIAIE	21P COD	, L
						[ ]		



CASE NUMBER		
CASE NOTIFER		

DEPENDENTS - SECTION 4														
	DEPENDENT 1 - LAST NAME			FIRST NAME					M.I. SUFFIX DATE			DATE OF BIRTH		
	· ·													
	DEPENDENT 1 - ADDRESS		CI	ГҮ				STATE	ZIP CODE		PHON	IE NUMBER		
										_		`		
										(		) -		
	RELATION TO DECEASED	SPOUSE MARRIAGE CERTIFICATE #	EM/	AIL ADDRESS				l l						
1.		or CHILD BIRTH CERTIFICATE #												
٠.									•					
	REPRESENTED BY (ATTORNEY/REPRESEN	REPRESENTED BY (ATTORNEY/REPRESENTATIVE)			PHONE NUMBER EMAIL ADDRESS									
				( ) -										
	REPRESENTATION ADDRESS		CITY					S				TATE ZIP CODE		
	DEPENDENT 2 - LAST NAME		FIF	RST NAME					M.I.	SUFFIX	[	DATE OF BIRTH		
	DEPENDENT 2 - ADDRESS		CI	ГҮ				STATE	ZIP CODE		PHON	NE NUMBER		
										(		) -		
	RELATION TO DECEASED	SPOUSE MARRIAGE CERTIFICATE #	EMA	AIL ADDRESS										
2.		or CHILD BIRTH CERTIFICATE #												
				DUONE NUM	250									
	REPRESENTED BY (ATTORNEY/REPRESEN	TATIVE)		PHONE NUM	BEK		EMAIL ADD	DRESS						
				( )	-									
	REPRESENTATION ADDRESS					CTTV						770 0005		
	REPRESENTATION ADDRESS					CITY				STA	I E	ZIP CODE		
	DEPENDENT 3 - LAST NAME		ETE	RST NAME					M.I.	SUFFIX	T 1	DATE OF BIRTH		
	DEFENDENT 3 - EAST NAME		111	(ST WATE						301111	1.	DATE OF BIRTH		
	DEPENDENT 3 - ADDRESS		CITY STATE					ZIP CODE	L .	DHUN	E NUMBER			
	DEFENDENT 5 - ADDRESS		CITY					ZIF CODE		TION				
										C		) -		
	RELATION TO DECEASED	SPOUSE MARRIAGE CERTIFICATE #	EM/	AIL ADDRESS				l l						
3.	or CHILD BIRTH CERTIFICATE #			LINIE ADDRESS										
٥.				•						ļ				
	REPRESENTED BY (ATTORNEY/REPRESENTATIVE)			PHONE NUMBER EMAIL ADDRESS										
				( ) -										
	REPRESENTATION ADDRESS					CITY				STA	TE	ZIP CODE		
	DEPENDENT 4 - LAST NAME		FIF	RST NAME					M.I.	SUFFIX	[	DATE OF BIRTH		
									<u> </u>	<u> </u>	<u>L</u>			
	DEPENDENT 4 - ADDRESS		CITY				STATE	ZIP CODE		PHON	IE NUMBER			
										(		) -		
	RELATION TO DECEASED	SPOUSE MARRIAGE CERTIFICATE #	EMA	AIL ADDRESS										
4.		or CHILD BIRTH CERTIFICATE #												
	DEDDECENTED DV /ATTORNEY/DECOR	TATTVE\		DUONE NUMBER	DED	1	EMATI ADD	DECC						
	REPRESENTED BY (ATTORNEY/REPRESENTATIVE)			PHONE NUMBER EMAIL ADDRESS										
			( ) -											
	DEDDECENTATION ADDRESS					CTTV				- CT		770 6005		
	REPRESENTATION ADDRESS		CITY					STA	ıE	ZIP CODE				
												i .		





ENGLISH This document contains important information. If you need language

assistance at no cost to you, please contact us by telephone or in person

immediately.

ILOKANO Daytoy nga dokumento ket addaan ti importante nga impormasyon. No

masapul mo ti mangipatarus nga libre, pangngaasim ta awagan na kami

ti telepono wenno umay na kami kitaen nga daras.

TAGALOG Ang dokumentong ito ay naglalaman ng importanteng impormasyon. Kung

nangangailangan kayo ng libreng tulong para maintindihan ito,

mangyaring makipag-ugnay sa amin sa pamamagitan ng telepono o

makipagkita kagaad sa amin.

CHINESE SIMPLIFIED 此文件有重要信息。如果您需要免费的语言协助服务,请您立刻给我们打

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SPANISH Este documento contiene información importante. Si necesita los servicios

de un intérprete sin costo alguno para usted, por favor llame de inmediato

por teléfono o contacte con alguna persona de nuestra oficina.

JAPANESE この書類には重要な情報が含まれています。無償で日本語の支援を受け

たい場合は、早急に電話あるいは直接窓口にて申込を行ってください。

CHUUKESE Mei auchea met masowan ei taropwe. Ika pwe ke mochen aninis ren

noumw chon chiaku esap kamo, kose mochen kokori kich won tengwa ika

fen pusin chuto rech.

MARSHALLESE Ilo pepa in ewor melele ko aorok. Ne kwoj aikuj jiban na ukok ilo ejjelok

wonen, jouj im kokkeitaak kem ilo talboon ak ilo wobij e ien eo emakaaj

tata.

KOREAN 이 문서는 중요한 정보가 포함되어 있습니다. 무료로 언어 도움이

필요하시면, 바로 전화 하시거나 오셔서 상담하십시오.

VIETNAMESE Tài liệu này bao gồm các thông tin quan trọng. Nếu bạn cần hỗ trợ ngôn

ngữ miễn phí, xin vui lòng đến gặp trực tiếp chúng tôi hoặc liên lạc qua

điện thoại ngay lập tức.