

# EMPLOYEE CENSUS

Please Fax completed Census  
to: 623-322-4607  
Thank you.

Company Name: \_\_\_\_\_  
 Location: \_\_\_\_\_  
 Eff Date Requested: \_\_\_\_\_  
 Requested by: \_\_\_\_\_

	Employee Name	DOB/Age	Sex	Spouse	# kids	Monthly Income	Date of Hire	Occupation	Zip Code
1									
2									
3									
4									
5									
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