

HAVE QUESTIONS OR NEED ASSISTANCE?
 Call Mike Miele at (941) 907-3828 ext. 244

Company Census Information

Complete & FAX to 941.411.4771

Company Name:

Contact Person:

Address:

City:

State, ZIP: E-Mail:

Phone: FAX:

Business Type: SIC:

Number of Employees:

Effective Date:

Current Carrier & Plan:

Current Monthly Premium:

#	Employee Name (optional)	Gender	D.O.B.	Age	Home Zip Code	*Status	Job Description
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							

* STATUS CODES: EE = Employee ES = Employee & Spouse EC = Employee & Children ESC = Family