

Business Name **Your Company Name**

City, State Zip (County) Dallas TX 75000

Type of Business Manufacture widgets

SIC number

Effective Date

Key:	EO	Employee only
	EC	Employee+child(ren)
	ES	Employee+spouse
	EF	Employee family
	LO	Life only

Notice the employee number change

EE#	Last name	First name	Relationship	Gender	Date of birth	Family status	Salary	Home zip code
1	Doe	John	Self	M	5/5/1955	EE	Optional	75000
2	Doe	Jane	Self	F	4/4/1960	EC	Optional	75000
2a	Doe	Mary	Daughter	F	8/8/2008			75000
2b	Doe	John Jr	Son	M	9/9/2009			75000
3	Worker	David	Self	M	10/10/19	EE	Optional	75222
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Email completed census to quotes@echp.net or use our website to upload.

www.ineedinsurance.com/request-a-quote

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