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GROUP CENSUS FORM

NAME OF COMPANY

COMPANY ADDRESS

NATURE OF BUSINESS

KEY CONTACT

PHONE

FAX

EMPLOYEE NAME	GENDER (M/F)	DATE OF BIRTH OR AGE	EMPLOYEE (EE) EE + SPOUSE EE + CHILD(REN) EE + FAMILY	SPOUSE AGE (IF APPLICABLE)	NUMBER OF CHILDREN
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
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