EMPLOYEE CENSUS DATA

Date:

*** Indicate separately your years experience underground, surface, or trucking. If none of these apply, list your years experience in given job under other.**

Company Name:											
Date:			**Policy #**								
EMPLOYEE NAME	**JOB DESCRIPTION**	**Smoker Y/N? If Yes # of Years**	**Social Security Number**	**Date of Birth**	**Spouse Date of Birth**	**Total # of Depend-ants**	*** Total# Years Under-ground**	*** Total # Years Surface**	*** Total # Years Trucking**	*** Total # Years Other**	**High School Grad Y/N? If No, Highest Grade**

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