EMPLOYEE CENSUS WORKSHEET

PLAN NAME: _____

PERIOD: _____

SSN	Last Name	First Name	Gender	Date of Birth	Date of Hire	Date of Term	Hours Of Service	Annual Salary	Employee 401(k) Contr.

PLAN NAME: _____

PERIOD: _____

SSN	Last Name	First Name	Gender	Date of Birth	Date of Hire	Date of Term	Hours Of Service	Annual Salary	Employee 401(k) Contr.

PLAN NAME: _____

PERIOD: _____

SSN	Last Name	First Name	Gender	Date of Birth	Date of Hire	Date of Term	Hours Of Service	Annual Salary	Employee 401(k) Contr.