

4208 West Partridge Way P.O. Box 3858, Peoria, IL 61612-3858 P: 309.691.5001 • F: 309.691.9402

Business Name:							
Address				Relationship Co Employee		Coverage Type: E (employee)	
County					Spouse		nployee/spouse)
Phone #:					Dependent		nployee/chldrn)
Fax #:					•	F (fami	
Total # of Full-time EEs						•	•
Total # of Part-time EEs							
Effective Date:							
Name	Relationship Code	DOB	Gender	Tobacco	Coverage Type	State/Zip	Full-Time Employees Waiving
Example:	•					•	
James Smith	employee	6/1/1975	М	Υ	F	IL 61614	
Sally Smith	spouse	6/5/1976	F	N			
Thomas Smith	child	1/4/2001	М	N			
		 	1	1			