VOLK INSURANCE BENEFITS
Same Great Company With The Trusted Name Since 1991
Lowell Volk, Owner & Principal Broker
1336 Oakridge Drive, Fort Collins, CO 80525
970.484.5073 or 888.484.5073

*** Required Field - Do not mix DOB and age. Choose one or the other.**

To add dependents, use Employee Record to map the dependents back to Employee records.

ALL TEXAS CLIENTS ARE REQUIRED TO ENTER DOB INSTEAD OF AGE.

Coverage Election Codes for Relationship, Medical, Dental and Vision

Employee Only = EE, Employee & Spouse = ES, Employee & Child/ren = EC, Employee & Family = EFAM

Group Name: _____

Address: _____

County: _____

Phone: _____

SIC: _____

Contact Person: _____

Effective Date: _____

CENSUS MANAGEMENT SPREADSHEET 4.0

Record #	*Relationship	Last Name	First Name	*DOB or Age	*Gender	Home Zip	Work Zip	Medical	Dental	Vision	Life	Life Volume	Disability	Annual Salary	Cobra or State Continuation

CENSUS MANAGEMENT SPREADSHEET 4.0 (continued)

Record #	*Relationship	Last Name	First Name	*DOB or Age	*Gender	Home Zip	Work Zip	Medical	Dental	Vision	Life	Life Volume	Disability	Annual Salary	Cobra or State Continuation