

Memo  
D. Wine & Associates

To: Attn of

Company

From: Richard Wine

Ofc # 598-6551, Fax # 598-6552, BP # 795-8675

Date:     /    /    

Subject: Group Insurance Quote

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COMPANY INFO

Type of Business

Business Name

Address \_\_\_\_\_ Ofc #

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_ Fax #

EMPLOYEE DATA

<u>SEX</u>	<u>EMPLOYEE AGE</u>	<u>SPOUSE AGE</u>	<u># OF CHILDREN</u>	<u>SMOKE CIGARETTES</u>
<u>  </u> M <u>  </u> F	AGE <u>      </u>	AGE <u>      </u>	# <u>      </u>	<u>  </u> Yes <u>  </u> No
<u>  </u> M <u>  </u> F	AGE <u>      </u>	AGE <u>      </u>	# <u>      </u>	<u>  </u> Yes <u>  </u> No
<u>  </u> M <u>  </u> F	AGE <u>      </u>	AGE <u>      </u>	# <u>      </u>	<u>  </u> Yes <u>  </u> No
<u>  </u> M <u>  </u> F	AGE <u>      </u>	AGE <u>      </u>	# <u>      </u>	<u>  </u> Yes <u>  </u> No
<u>  </u> M <u>  </u> F	AGE <u>      </u>	AGE <u>      </u>	# <u>      </u>	<u>  </u> Yes <u>  </u> No
<u>  </u> M <u>  </u> F	AGE <u>      </u>	AGE <u>      </u>	# <u>      </u>	<u>  </u> Yes <u>  </u> No
<u>  </u> M <u>  </u> F	AGE <u>      </u>	AGE <u>      </u>	# <u>      </u>	<u>  </u> Yes <u>  </u> No
<u>  </u> M <u>  </u> F	AGE <u>      </u>	AGE <u>      </u>	# <u>      </u>	<u>  </u> Yes <u>  </u> No
<u>  </u> M <u>  </u> F	AGE <u>      </u>	AGE <u>      </u>	# <u>      </u>	<u>  </u> Yes <u>  </u> No

When would you like coverage effective?     /    /





# OF  
CHILDREN

SMOKE  
CIGARETTES

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\_\_\_ Yes \_\_\_ No

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\_\_\_ Yes \_\_\_ No

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\_\_\_ Yes \_\_\_ No

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