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PENSION

INVESTORS

CORPORATION

OF ORLANDO, INC.

CENSUS DATA SHEET

Name of Company _____

Fiscal Year End _____ Plan Year End _____ Date of Incorporation _____

Type of Corporation: _____ If LLC, Taxed as: _____

(S-Corp, C-Corp, LLC, Sole Proprietor, etc.)

Are there other businesses, incorporated or not, owned by this business or the owners of this business? Is this an affiliated service or controlled group? () yes () no; If yes, please provide information on other business.

Does this business, or any affiliated/controlled business, maintain any other qualified plan (including frozen plans) for which Pension Investors Corp. does not provide services? () yes () no; If yes, please provide information on the other plan.

Desired Annual Contribution Level: \$ _____

Full Name (include all employees)	Owner, Family of Owner or Union*	Sex	Date of Birth	Date of Hire	Date of Term.	# Hours Worked per Year**	Annual Compensation	Current Deferral \$ or %
							\$	
							\$	
							\$	
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							\$	
							\$	

*Enter Owner, Relationship to Owner (spouse, son, daughter, etc) or Union. If partnership, also enter percent owned
 **Less than 1000 hours per year is considered Part-time for plan purposes. Completed by: _____
 If more than 1000 hours worked per year, simply enter 1000+. Date: _____