

LSJE, LLC

6100 Red Hook Quarters, Suite B-3, St. Thomas, VI 00802-1348

Phone: [REDACTED] E-mail: thesaintjames.group@gmail.com

Emergency Contact Form

Today's Date:

4-2-20-19

Start Date:

4-2-20-19

Employee Name:

Revue Alexandre

Date of Birth:

[REDACTED]

Physical Address:

[REDACTED]

Mailing Address:

St Thomas - VI 00802

Cell Phone:

[REDACTED]

Phone (other):

[REDACTED]

E-mail:

[REDACTED]

Marital Status:

[REDACTED]

Title/Position:

Assistant

Driver's License No:

[REDACTED]

Allergies or Health Concerns:

[REDACTED]

☐ Unknown

Current Medications:

[REDACTED]

Doctor's Name:

[REDACTED]

Doctor's Phone:

[REDACTED]

Doctor's Name:

[REDACTED]

Doctor's Phone:

[REDACTED]

In case of emergency, please contact:

Name:

No Phone

Relationship:

Brother

Phone:

[REDACTED]

Name:

Beverly

Relationship:

Sister

Phone:

[REDACTED]

This information is for your safety and the safety of others.