

# LSJE, LLC

6100 Red Hook Quarters Suite B-3 St. Thomas, VI 00802 Tel: [REDACTED] Fax: [REDACTED]

SDNY\_GM\_00169381

## Emergency Contact Form

Date: 04/10/18

Start Date: 04/10/18

Employee Name: Dupson B. Donissaint

Address: 6643 Frydenhoj, St Thomas, VI 00802

Date of Birth: [REDACTED]

Phone: [REDACTED] Cell: [REDACTED]

E-Mail: [REDACTED]

Title / Position: Landscaper

Marital Status: [REDACTED]

License: [REDACTED]

### Emergency Information

Allergies or Health Concerns: [REDACTED]

Blood Type: [REDACTED]

Current Medication:

Doctor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

### In case of an Emergency, Please contact :

Name Angel Lundy Relationship [REDACTED]  
Name \_\_\_\_\_ Relationship [REDACTED]

*This Information is for your safety and the safety of others*

CONFIDENTIAL