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	1. NAME (CAPS) LAST-FIRST-MIDDLE	ELA MR-MISS-MRS.	2. EMPLOYEE NO. 8 SEX 3	BIRTH DATE (Mo. De. Vr.) 4. SC	SCIAL SECURITY AND 25
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	12. NATURE OF ACTION		2 FICA 8 OTHER 13. EFFECTIVE DATE	CIVIL SERVICE OR OTHER LEG	AL AUTHORITY
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