

CLIENT OPENING SURVEY FORM

\mathbf{Mr}	${f A}$	Evans
MR./MRS./MISS	FIRST NAME	LAST NAME
908-802-3564		908-602-5258
CONTACT NUMBER	ALTERNATE NUMBER	
	COMPANY DATA B	ASE
contact@actionline-	Shimokaji & Assoc Pc	shimokaji.com
recruit.co.uk EMAIL ADDRESS	COMPANY NAME	WEBSITE URL
911 Research Drive		
ddress		
Irvine	CA	92618
City	State	ZIP Code
Legal Services		
IC DESCRIPTION		
8111	Independent	
SIC CODE	ENTITY TYPE	
Under \$500,000	1,011,400.00	
COMPANY SALES	REVENUE (USD)	
Orange	YES	
COUNTRY/REGION		MEDICAL INSURANCE
Q		<u> </u>
JS Hwy 1 S, Saint Augustine, I Dr S, Saint Augustine, FL 3208		+1 (904) 117- 1782