

CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss	Shalon	Shadrick
MR./MRS./MISS	FIRST NAME	LAST NAME
718-232-2337		718-394-4974
CONTACT NUMBER		ALTERNATE NUMBER
	COMPANY DATA I	BASE
-h-l@4	Apple Creek Carpet	NI A
shalon@cox.net EMAIL ADDRESS	Care COMPANY NAME	WEBSITE URL
305 Park Ave		
Address		
Center Point	Iowa	52213-9421
City	State	ZIP Code
Laundry and Dry-Cleaning Ser	vices	
IC DESCRIPTION		
9531		Independent
SIC CODE		ENTITY TYPE
Under \$500,000		138,300
COMPANY SALES		REVENUE (USD)
Iowa		YES
COUNTRY/REGION		MEDICAL INSURANCE
•		<u>©</u>
US Hwy 1 S, Saint Augustine, F. Dr S, Saint Augustine, FL 32080	d +1 (904) 117- 1782	