

CLIENT OPENING SURVEY FORM

MRS	A.	Brindley	
MR./MRS./MISS	FIRST NAME	LAST NAME	
901-901-4726		901-739-5892	
CONTACT NUMBER		ALTERNATE NUMBER	
	COMPANY DATA E	BASE	
rewinds@btinternet.com	Larry Levine & Assoc	levineandassociates.com	
EMAIL ADDRESS	COMPANY NAME	WEBSITE URL	
3701 Riverside Drive # 604			
ddress			
Sherman Oaks	CA	91423	
City	State	ZIP Code	
Public Relations Services			
IC DESCRIPTION			
8743		Independent	
SIC CODE		ENTITY TYPE	
Under \$500,000		191,300	
COMPANY SALES		REVENUE (USD)	
Los Angeles		YES	
COUNTRY/REGION		MEDICAL INSURANCE	
•		•	
US Hwy 1 S, Saint Augustine, FL 32086 ,Plantation Island Dr S, Saint Augustine, FL 32080		d +1 (904) 117- 1782	