



# CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss

MR./MRS./MISS

Glen

FIRST NAME

Bartolet

LAST NAME

206-697-5796

CONTACT NUMBER

206-389-1482

ALTERNATE NUMBER

## COMPANY DATA BASE

[glen\\_bartolet@hotmail.com](mailto:glen_bartolet@hotmail.com)

EMAIL ADDRESS

Camp Joy

COMPANY NAME

[www.joycamp.com](http://www.joycamp.com)

WEBSITE URL

131 Camp Joy Rd

Address

Boulder Creek

City

CA

State

95006

ZIP Code

Wholesale Trade-Nondurable Goods

SIC DESCRIPTION

5148

SIC CODE

Independent

ENTITY TYPE

Under \$500,000

COMPANY SALES

177,000

REVENUE (USD)

Santa Cruz

COUNTRY/REGION

YES

MEDICAL INSURANCE



US Hwy 1 S, Saint Augustine, FL 32086 ,Plantation Island  
Dr S, Saint Augustine, FL 32080



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1782