



CLIENT OPENING SURVEY FORM

Female
MR./MRS./MISS

vickie
FIRST NAME

brown
LAST NAME

8709951929
CONTACT NUMBER

254-816-8417
ALTERNATE NUMBER

COMPANY DATA BASE

vic_obrown@hotmail.com
EMAIL ADDRESS

Koster's Cash Loans
COMPANY NAME

http://www.kosterfinance.com
WEBSITE URL

316 Bridger Ave Ste 104
Address

Las Vegas
City

Nevada
State

89101-5915
ZIP Code

Other Auxiliary Finance and Investment Services
SIC DESCRIPTION

6419
SIC CODE

Independent
ENTITY TYPE

Under \$500,000
COMPANY SALES

800,000.01
REVENUE (USD)

Nevada
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