

## CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss	James	outt
MR./MRS./MISS	FIRST NAME	LAST NAME
404-621-8927		404-844-1427
CONTACT NUMBER		ALTERNATE NUMBER
	COMPANY DATA I	BASE
jbutt@yahoo.com	Hadas Stein Cpa Inc	hadassteincpa.com
EMAIL ADDRESS	COMPANY NAME	WEBSITE URL
3261 Moorpark Street Suite 20	1	
Address		
Sherman Oaks	CA	91423
City	State	ZIP Code
Accounting, Auditing, and Book	keeping Services	
IC DESCRIPTION		
NA		Independent
SIC CODE		ENTITY TYPE
<b>Under \$500,000</b>		36,800.00
COMPANY SALES		REVENUE (USD)
Los Angeles		YES
COUNTRY/REGION		MEDICAL INSURANCE
•		•
JS Hwy 1 S, Saint Augustine, Fl Dr S, Saint Augustine, FL 32080		+1 (904) 117- 1782