



CLIENT OPENING SURVEY FORM

Female
MR./MRS./MISS

Michelle
FIRST NAME

Dobyne
LAST NAME

9188616752
CONTACT NUMBER

303-521-9860
ALTERNATE NUMBER

COMPANY DATA BASE

bookmichelledobyne@gmail.com
EMAIL ADDRESS

Casha-Cross
Chiropractic, INC
COMPANY NAME

www.sacramentobackdr.com
WEBSITE URL

5330 Primrose Dr
Address

Fair Oaks
City

CA
State

95628
ZIP Code

Health Services
SIC DESCRIPTION

8041
SIC CODE

Independent
ENTITY TYPE

Under \$500,000
COMPANY SALES

688,700.02
REVENUE (USD)

Sacramento
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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