

## CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss	wynell	Dorshorst
MR./MRS./MISS	FIRST NAME	LAST NAME
640-476-1262	640-749-9879 ALTERNATE NUMBER	
CONTACT NUMBER		
	COMPANY DATA BAS	E
nell_dorshorst@dorshorst.org	Jacobsma & Associates	http://www.jacobsma.com
EMAIL ADDRESS	COMPANY NAME	WEBSITE URL
1508 Olive St Ste B		
Address		
Paso Robles	California	93446-2114
City	State	ZIP Code
Land Development and Subdivis	sion	
SIC DESCRIPTION		
3211	Independent	
SIC CODE	ENTITY TYPE	
<b>Under \$500,000</b>	163,399.99	
COMPANY SALES	REVENUE (USD)	
California	YES	
COUNTRY/REGION	MEDICAL INSURANCE	
<b>Q</b>		•
US Hwy 1 S, Saint Augustine, FL 32086, Plantation Island		+1 (904) 117- 1782