

CLIENT OPENING SURVEY FORM

| Mr/Mrs/Miss | Nieves | Gottsr |
|---|---------------------------------------|-----------------------|
| MR./MRS./MISS | FIRST NAME | LAST NAME |
| 406-427-4274 | | 406-444-6094 |
| CONTACT NUMBER | | ALTERNATE NUMBER |
| | COMPANY DATA I | BASE |
| | Concord University | |
| nieves_gotter@yahoo.com | Womens Education | www.aauw-concord.org |
| EMAIL ADDRESS | Foundation COMPANY NAME | _ WEBSITE URL |
| 8818 Calle Perico | | |
| Address | | |
| NA | NA | NA |
| City | State | ZIP Code |
| Real Estate | | |
| SIC DESCRIPTION | | |
| 6513 | | Independent |
| SIC CODE | | ENTITY TYPE |
| Under \$500,000 | | 400,000.01 |
| COMPANY SALES | | REVENUE (USD) |
| Contra Costa | | YES |
| COUNTRY/REGION | | MEDICAL INSURANCE |
| | | |
| Q | | © |
| US Hwy 1 S, Saint Augustine, F Dr S, Saint Augustine, FL 32080 | · · · · · · · · · · · · · · · · · · · | +1 (904) 117- 1782 |