



# CLIENT OPENING SURVEY FORM

Mr

MR./MRS./MISS

Andrew

FIRST NAME

Lee

LAST NAME

760-966-0026 ext. 100

CONTACT NUMBER

760-212-7485

ALTERNATE NUMBER

## COMPANY DATA BASE

[sales@leehire.co.uk](mailto:sales@leehire.co.uk)

EMAIL ADDRESS

P A Home Town Law

COMPANY NAME

<http://www.hometownlawfirm.com>

WEBSITE URL

126 Nw 76Th Dr

Address

Gainesville

City

Florida

State

32607-6674

ZIP Code

Legal Services

SIC DESCRIPTION

6931

SIC CODE

Independent

ENTITY TYPE

Under \$500,000

COMPANY SALES

138,600.01

REVENUE (USD)

Florida

COUNTRY/REGION

YES

MEDICAL INSURANCE



US Hwy 1 S, Saint Augustine, FL 32086 ,Plantation Island  
Dr S, Saint Augustine, FL 32080



+1 (904) 117-  
1782