

## CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss	Carmelina	LindRll
MR./MRS./MISS	FIRST NAME	LAST NAME
606-724-7671		606-874-4160
CONTACT NUMBER	ALTERNATE NUMBER	
	COMPANY DATA BA	SE
melina_lindall@lindall.com	Irvine CO	irvinecompany.com
EMAIL ADDRESS	COMPANY NAME	WEBSITE URL
4000 Jamboree Road		
ddress		
Irvine	CA	92606
City	State	ZIP Code
Imployment Agencies		
IC DESCRIPTION		
7361	Independent	
SIC CODE	ENTITY TYPE	
Unknown	660,799.98	
COMPANY SALES	REVENUE (USD)	
Orange	YES	
COUNTRY/REGION	MEDICAL INSURANCE	
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JS Hwy 1 S, Saint Augustine, F. Dr S, Saint Augustine, FL 32080	· · · · · · · · · · · · · · · · · · ·	+1 (904) 117- 1782