



# CLIENT OPENING SURVEY FORM

Male  
MR./MRS./MISS

Jason  
FIRST NAME

Halstead  
LAST NAME

3524265851  
CONTACT NUMBER

303-794-1341  
ALTERNATE NUMBER

## COMPANY DATA BASE

jasongalstead74@gmail.com  
EMAIL ADDRESS

Lewis Marenstein Wicke  
Sherwin  
COMPANY NAME

lmwslaw.com  
WEBSITE URL

20750 Ventura Boulevard # 400  
Address

Woodland Hills  
City

CA  
State

91364  
ZIP Code

Legal Services  
SIC DESCRIPTION

8111  
SIC CODE

Independent  
ENTITY TYPE

\$500,000 to \$999,999  
COMPANY SALES

99,600.00  
REVENUE (USD)

Los Angeles  
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