

CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss	Melissa	Wiklund
MR./MRS./MISS	FIRST NAME	LAST NAME
419-939-3613		419-254-4591
CONTACT NUMBER	ALTERNATE NUMBER	
	COMPANY DATA B	ASE
	Chevra Kadisha	
melissa@cox.net EMAIL ADDRESS	Mortuary COMPANY NAME	www.chevrakadisha.com WEBSITE URL
NA .		
Address		
West Hollywood	CA	90046
City	State	ZIP Code
Personal Services		
SIC DESCRIPTION		
7261		Independent
SIC CODE		ENTITY TYPE
Under \$500,000		100,000
COMPANY SALES		REVENUE (USD)
Los Angeles		YES
COUNTRY/REGION		MEDICAL INSURANCE
•		<u> </u>
US Hwy 1 S, Saint Augustine, F. Dr S, Saint Augustine, FL 32080	+1 (904) 117- 1782	