



CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss

MR./MRS./MISS

Joseph

FIRST NAME

Cryer

LAST NAME

714-584-2237

CONTACT NUMBER

714-698-2170

ALTERNATE NUMBER

COMPANY DATA BASE

joseph_cryer@cox.net

EMAIL ADDRESS

Koster's Cash Loans

COMPANY NAME

<http://www.kosterfinance.com>

WEBSITE URL

316 Bridger Ave Ste 104

Address

Las Vegas

City

Nevada

State

89101-5915

ZIP Code

Other Auxiliary Finance and Investment Services

SIC DESCRIPTION

6419

SIC CODE

Independent

ENTITY TYPE

Under \$500,000

COMPANY SALES

800,000.01

REVENUE (USD)

Nevada

COUNTRY/REGION

YES

MEDICAL INSURANCE



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



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1782