

CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss	Janey	GRoisi	
MR./MRS./MISS	FIRST NAME	LAST NAME	
608-967-7194		608-486-6912	
CONTACT NUMBER		ALTERNATE NUMBER	
	COMPANY DATA I	BASE	
jgabisi@gmail.com	Prata & Daley	hpdlegal.net	
EMAIL ADDRESS	COMPANY NAME	WEBSITE URL	
2490 W Shaw Ave			
Address			
Los Angeles	CA	90071	
City	State	ZIP Code	
Legal Services			
SIC DESCRIPTION			
8111		Independent	
SIC CODE		ENTITY TYPE	
\$500,000 to \$999,999		756,500.01	
COMPANY SALES		REVENUE (USD)	
Los Angeles		YES	
COUNTRY/REGION		MEDICAL INSURANCE	
•		•	
US Hwy 1 S, Saint Augustine, Fl Dr S, Saint Augustine, FL 32080	, , , , , , , , , , , , , , , , , , ,	+1 (904) 117- 1782	