

## CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss	Deonna	lipplsy
MR./MRS./MISS	FIRST NAME	LAST NAME
248-916-4677		248-796-4966
CONTACT NUMBER		ALTERNATE NUMBER
	COMPANY DATA I	BASE
onna_kippley@gmail.com	Core Petroleum LLC	http://www.corepetrol.com
EMAIL ADDRESS	COMPANY NAME	WEBSITE URL
5 Exchange Pl Ste 1110		
ddress		
Jersey City	New Jersey	07302-3912
City	State	ZIP Code
3299		Independent
SIC CODE		ENTITY TYPE
<b>Under \$500,000</b>		630,000
COMPANY SALES		REVENUE (USD)
New Jersey		YES
COUNTRY/REGION		MEDICAL INSURANCE
•		•
US Hwy 1 S, Saint Augustine, FL 32086 ,Plantation Island Dr S, Saint Augustine, FL 32080		d +1 (904) 117- 1782