

## CLIENT OPENING SURVEY FORM

Mrs	Rachel	Grimmer
MR./MRS./MISS	FIRST NAME	LAST NAME
305-420-8970		305-575-8481
CONTACT NUMBER	ALTERNATE NUMBER	
	COMPANY DATA B	ASE
nail@rachelgrimmer.com	Lewis Marenstein Wicke Sherwin	lmwslaw.com
EMAIL ADDRESS	COMPANY NAME	WEBSITE URL
0750 Ventura Boulevard # 40	00	
Address		
<b>Woodland Hills</b>	CA	91364
City	State	ZIP Code
Legal Services		
SIC DESCRIPTION		
8111		Independent
SIC CODE		ENTITY TYPE
\$500,000 to \$999,999		99,600.00
COMPANY SALES		REVENUE (USD)
Los Angeles		YES
COUNTRY/REGION		MEDICAL INSURANCE
•		•
JS Hwy 1 S, Saint Augustine, Dr S, Saint Augustine, FL 320		+1 (904) 117- 1782