



# CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss

MR./MRS./MISS

Ressie

FIRST NAME

Auffrey

LAST NAME

305-604-8981

CONTACT NUMBER

305-287-4743

ALTERNATE NUMBER

## COMPANY DATA BASE

ressie.auffrey@yahoo.com

EMAIL ADDRESS

Casha-Cross  
Chiropractic, INC

COMPANY NAME

www.sacramentobackdr.com

WEBSITE URL

5330 Primrose Dr

Address

Fair Oaks

City

CA

State

95628

ZIP Code

Health Services

SIC DESCRIPTION

8041

SIC CODE

Independent

ENTITY TYPE

Under \$500,000

COMPANY SALES

688,700.02

REVENUE (USD)

Sacramento

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