

CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss	Barbra	Adkin
MR./MRS./MISS	FIRST NAME	LAST NAME
718-201-3751		718-732-9475
CONTACT NUMBER		ALTERNATE NUMBER
	COMPANY DATA B	SASE
badkin@hotmail.com	Pulse Capital Partners,	http://www.pulsecp.com
EMAIL ADDRESS	COMPANY NAME	WEBSITE URL
600 3Rd Ave # 231		
Address		
New York	New York	10016-1919
City	State	ZIP Code
Other Auxiliary Finance and In	vestment Services	
SIC DESCRIPTION		
6419		Independent
SIC CODE		ENTITY TYPE
Under \$500,000		177,000
COMPANY SALES		REVENUE (USD)
New York		YES
COUNTRY/REGION		MEDICAL INSURANCE
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US Hwy 1 S, Saint Augustine, F Dr S, Saint Augustine, FL 3208	+1 (904) 117- 1782	