

## CLIENT OPENING SURVEY FORM

MIT/MITS/MISS	Colette	IRrdRs
MR./MRS./MISS	FIRST NAME	LAST NAME
402-896-4946		402-707-1602
CONTACT NUMBER		ALTERNATE NUMBER
	COMPANY DATA I	BASE
olette.kardas@yahoo.com	Drivers Tu Williams	driverstuwilliams.com
EMAIL ADDRESS	COMPANY NAME	WEBSITE URL
5465 Saloma Ave		
Address		
Lakewood	CA	90712
City	State	ZIP Code
Accounting, Auditing, and Book SIC DESCRIPTION	keeping Services	
8721		Independent
SIC CODE		ENTITY TYPE
\$500,000 to \$999,999		75,800.00
COMPANY SALES		REVENUE (USD)
Los Angeles		YES
COUNTRY/REGION	<del></del>	MEDICAL INSURANCE
<b>Q</b>		0
US Hwy 1 S, Saint Augustine, FL 32086 ,Plantation Island		d +1 (904) 117-