

CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss	Jolanda	HRnRfRn
MR./MRS./MISS	FIRST NAME	LAST NAME
207-448-9196		207-266-6184
CONTACT NUMBER		ALTERNATE NUMBER
	COMPANY DATA I	BASE
jhanafan@yahoo.com	Camarillo Bowl	www.harleysbowl.com
EMAIL ADDRESS	COMPANY NAME	WEBSITE URL
5015 Madison Ave		
Address		
Camarillo	CA	93010
City	State	ZIP Code
Amusement & Recreation Servi	ces	
SIC DESCRIPTION		
7933		Independent
SIC CODE		ENTITY TYPE
Under \$500,000		635,299.98
COMPANY SALES		REVENUE (USD)
Ventura		YES
COUNTRY/REGION	MEDICAL INSURANCE	
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US Hwy 1 S, Saint Augustine, Fl Dr S, Saint Augustine, FL 32080		d +1 (904) 117- 1782