

CLIENT OPENING SURVEY FORM

Male	William	Ortiz	
MR./MRS./MISS	FIRST NAME	LAST NAME	
3052405517		570-355-1665	
CONTACT NUMBER		ALTERNATE NUMBER	
	COMPANY DATA B	ASE	
:::::::::::::::::::::::::::::::::	Pulse Capital Partners,	1.44	
villyortiz6327@gmail.com EMAIL ADDRESS	COMPANY NAME	http://www.pulsecp.com 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	
•		•	
US Hwy 1 S, Saint Augustine, FL 32086, Plantation Island Dr S, Saint Augustine, FL 32080		+1 (904) 117- 1782	