



CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss

MR./MRS./MISS

Dalene

FIRST NAME

Riden

LAST NAME

603-315-6839

CONTACT NUMBER

603-745-7497

ALTERNATE NUMBER

COMPANY DATA BASE

dalene.riden@aol.com

EMAIL ADDRESS

Jan Medical, Inc.

COMPANY NAME

<http://www.janmedical.com>

WEBSITE URL

800 W El Camino Real Ste 180

Address

Mountain View

City

California

State

94040-2586

ZIP Code

Medical and Surgical Equipment Manufacturing

SIC DESCRIPTION

2412

SIC CODE

Independent

ENTITY TYPE

\$500,000 to \$999,999

COMPANY SALES

40,000.00

REVENUE (USD)

California

COUNTRY/REGION

YES

MEDICAL INSURANCE



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