

CLIENT OPENING SURVEY FORM

| Female | Kathleen | Lambert |
|--|--------------------------|-----------------------|
| MR./MRS./MISS | FIRST NAME | LAST NAME |
| 760-458-9302 | | 760-458-9302 |
| CONTACT NUMBER | ALTERNATE NUMBER | |
| | COMPANY DATA B | ASE |
| | AITech International | |
| info@bnstele.com EMAIL ADDRESS | Corporation COMPANY NAME | website url |
| 207 13Th St | | |
| Address | | |
| Sunnyvale | CA | 94086 |
| City | State | ZIP Code |
| Business Services, NEC | | |
| IC DESCRIPTION | | |
| NA | | Independent |
| SIC CODE | | ENTITY TYPE |
| \$1,000,000 to \$4,999,999 | | 129,200.00 |
| COMPANY SALES | | REVENUE (USD) |
| Santa Clara | | YES |
| COUNTRY/REGION | | MEDICAL INSURANCE |
| | | |
| • | | 0 |
| US Hwy 1 S, Saint Augustine, F Dr S, Saint Augustine, FL 3208 | | +1 (904) 117- 1782 |