



# CLIENT OPENING SURVEY FORM

Female

MR./MRS./MISS

Donna

FIRST NAME

Page

LAST NAME

3173455896

CONTACT NUMBER

408-813-1105

ALTERNATE NUMBER

## COMPANY DATA BASE

djpage0326@yahoo.com

EMAIL ADDRESS

Clearly Kombucha

COMPANY NAME

www.clearlykombucha.com

WEBSITE URL

4800 E Pacific Coast Hwy

Address

Fairfield

City

CA

State

94533

ZIP Code

Food and Kindred Products

SIC DESCRIPTION

2099

SIC CODE

Independent

ENTITY TYPE

Under \$500,000

COMPANY SALES

135,800

REVENUE (USD)

Solano

COUNTRY/REGION

YES

MEDICAL INSURANCE



US Hwy 1 S, Saint Augustine, FL 32086 ,Plantation Island  
Dr S, Saint Augustine, FL 32080



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1782