



CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss

MR./MRS./MISS

Marti

FIRST NAME

MRyoury

LAST NAME

776-774-4422

CONTACT NUMBER

776-469-1048

ALTERNATE NUMBER

COMPANY DATA BASE

marti.maybury@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