PROPOSERS' CONFERENCE
AS-NEEDED SLOPE MOWING SERVICES (2010-AN028)
LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS
THURSDAY, DECEMBER 2, 2010, 2P.M., CONFERENCE ROOM A

Please print clearly and leave your business card.

COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
Greentech Landscape Inc. Company Name Name of Parent Company (if Applicable)	Abel Abutzaith Yh Attendee's Name Vice-President Title	Mailing Address: 13560 Telegraph Rd City: Whittier State: CA Zip: 90604 Telephone Number: (562) 360-4000 FAX: ( ) E-Mail Address: abelc_greentechlm@yahoo.com
Far-East Landscape Inc Company Name Name of Parent Company (if Applicable)	Katherine Moon Attendee's Name Title	Mailing Address: P.O. Box 950351 City: Mission Hills State: CA Zip: 91395 Telephone Number: (818) 881-3227 FAX: (661 297-6282) ~~Fareastmoon1~~ E-Mail Address: FarEastmoon1@yahoo.com
Powerland Equipment Company Name Name of Parent Company (if Applicable)	Susan Herrera Attendee's Name CFO Title	Mailing Address: 27943 Valley Center Rd City: Valley Center State: CA Zip: 92082 Telephone Number: (760) 749-1271 FAX: (760 749-743 E-Mail Address: susan@powerlandequipment.com
Powerland Equipment Company Name Name of Parent Company (if Applicable)	Malcolm Smith Attendee's Name CEO Title	Mailing Address: 27943 Valley Center RD City: Valley Center State: Ca Zip: 92082 Telephone Number: (760) 749-1271 FAX: (760-749-7413) malc@powerlandequip.com E-Mail Address:
OTERO LANDSCAPE + NURSERY Company Name Name of Parent Company (if Applicable)	JUAN OTERO Attendee's Name Title	Mailing Address 6206 BURWOOD AVE City L.A. State: CA Zip: 90042 Telephone Number (818) 679-6980 FAX: ( ) E-Mail Address

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COMPLETE LANDSCAPE CARE INC Company Name Name of Parent Company (if Applicable)	ROBERTO NOYOLA Attendee's Name SUPERVISOR Title	Mailing Address 13316 LEFFINGWELL RD. City: WHITTIER State: CA. Zip: 9065 Telephone Number: (562 9464441 FAX: (562-941-9943) E-Mail Address.
WURZEL LANDSCAPE Company Name Name of Parent Company (if Applicable)	MARC WURZEL Attendee's Name Title	Mailing Address 3214 OAKDELL LN City: STUDIO CITY State: CA Zip: 91604 Telephone Number (818) 762-8653 FAX: ( ) E-Mail Address WURLAN @ AOL.COM
Conejo Crest Landscape Company Name Name of Parent Company (if Applicable)	Dede Walter Attendee's Name Cost Service Mgr. Title	Mailing Address 16435 Hart St. City: Van Nuys State: CA Zip: 91406 Telephone Number (818) 988-9696 FAX: (818 988-4934 dwalter@conejocrest.com E-Mail Address:
MARINA LANDSCAPE INC. Company Name Name of Parent Company (if Applicable)	MARCUS NISHIHARA Attendee's Name Business Development Title	Mailing Address 1900 S. LEWIS ST. City: ANAHEIM State: CA Zip: 92805 Telephone Number (714) 704-0492 FAX: (714-704-0451) E-Mail Address: MNISHIHARA@MARINACO.COM
SPECIALTY MOWING SERVICE Company Name NPC CONSTRUCTION INC. Name of Parent Company (if Applicable)	OLE NAERBO Attendee's Name PRESIDENT Title	Mailing Address 4949 2ND ST City: FAIRBANKS State: CA Zip: 92028 Telephone Number (760) 728-1591 FAX: (760/728-9253) E-Mail Address SPECIALTYMOWING.OLE@GMAIL.COM

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
Azteca landscape Company Name Name of Parent Company (if Applicable)	Nick Alvarado Attendee's Name Manager Title	Mailing Address: 1027 E Acacia St City: Ontario State: Ca Zip: 91761 Telephone Number: (909) 673-0889 FAX: (909 673-9192) E-Mail Address: nick@aztecalandscape.com
OAKRIDGE LANDSCAPE, INC. Company Name ~~RICHARD DUNBAR~~ Name of Parent Company (if Applicable)	RICHARD DUNBAR Attendee's Name GM Title	Mailing Address: 8618 HASKELL City: NORTH HILLS State: CA Zip: 91343 Telephone Number: (818) 891-0468 FAX: (818)892-9273) E-Mail Address: RICHARD@OAKRIDGELANDSCAPE.NET
Company Name Name of Parent Company (if Applicable)	Attendee's Name Title	Mailing Address. City: State: Zip: Telephone Number: ( ) FAX: ( ) E-Mail Address:
Company Name Name of Parent Company (if Applicable)	Attendee's Name Title	Mailing Address: City: State: Zip: Telephone Number: ( ) FAX: ( ) E-Mail Address.
Company Name Name of Parent Company (if Applicable)	Attendee's Name Title	Mailing Address City: State: Zip: Telephone Number: ( ) FAX: ( ) E-Mail Address.

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MARIPOSA LANDSCAPES Company Name Name of Parent Company (if Applicable)	JOSHUA CHO Attendee's Name ESTIMATOR Title	Mailing Address: 15529 ARROW HWY City: IRWINDALE State: CA Zip: 91706 Telephone Number: (626) 960 0196 FAX: (626) 960 3809) E-Mail Address: joshua@mariposa-ca.com
Service-Scape Company Name Name of Parent Company (if Applicable)	Randel Ebinden Attendee's Name Supervisor Title	Mailing Address: 9716 Cottonwood Way City: Alta Loma State: Ca. Zip: 91737 Telephone Number: (909) 702-1045 FAX: (909) 877-3022 Service_Scape@ E-Mail Address: verizon.net
Company Name Name of Parent Company (if Applicable)	Attendee's Name Title	Mailing Address: City: State: Zip: Telephone Number: ( ) FAX: ( ) E-Mail Address.
Company Name Name of Parent Company (if Applicable)	Attendee's Name Title	Mailing Address City State: Zip: Telephone Number: ( ) FAX: ( ) E-Mail Address.
Company Name Name of Parent Company (if Applicable)	Attendee's Name Title	Mailing Address City State: Zip: Telephone Number: ( ) FAX: ( ) E-Mail Address.

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ROAD MAINTENANCE DIV Company Name MDS Name of Parent Company (if Applicable)	QUANG LUONG Attendee's Name Principal CEA Title	Mailing Address: ~~qluong@~~ 38126 N. Sierra Hwy City: PALMDALE State: CA Zip: 93552 Telephone Number: (661) 947-7173 FAX: (661) 947-0754 E-Mail Address: qluong@dpw.lacounty.gov
Snayzer's Inc Company Name Name of Parent Company (if Applicable)	Ezekiel Snayzer Attendee's Name Rep Title	Mailing Address: 1663 E Del Amo Blvd City: Carson State: CA Zip: 90746 Telephone Number: (323) 975-7223 FAX: (310) 767-5066 E-Mail Address: Snyz2@aol.com
Company Name Name of Parent Company (if Applicable)	Attendee's Name Title	Mailing Address City State Zip Telephone Number ( ) FAX ( ) E-Mail Address
Company Name Name of Parent Company (if Applicable)	Attendee's Name Title	Mailing Address City State Zip Telephone Number ( ) FAX ( ) E-Mail Address
Company Name Name of Parent Company (if Applicable)	Attendee's Name Title	Mailing Address City State Zip Telephone Number ( ) FAX ( ) E-Mail Address