PROPOSERS' CONFERENCE AS-NEEDED OPERATION OF THE TECHNICAL LIBRARY (2009-AN015) COUNTY OF LOS ANGELES DEPARTMENT OF PUBLIC WORKS TUESDAY, SEPTEMBER 8, 2009, AT 3:30 P.M., CONFERENCE ROOM A

Please print clearly and leave your business card.

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
Library Associates, Inc. Name of Parent Company (if Applicable)	Johnne Schwall & Attendee's Name BAKH SMANN SR. Recruiter Title	Mailing Address: 6500 Wilshire Blvd., Suite 2240 City: Los Angeles State: CA zip: 90058 Telephone Number: (323) 302-9434 FAX: (323) 852-1093 E-Mail Address. Jschwarz @ 1.6 Rary associates com
Library Associates Companies (LA) Company Name Library Associates Inc. Name of Parent Company (if Applicable)	BRAD ROGERS Attendee's Name Recharter Title	Mailing Address: 6500 Wilshire Blvd. Suite 2240 City: Los Angeles State: CA zip: 90048 Telephone Number (323) 302-9435 FAX: (323) 852-1093 E-Mail Address: brogers @ library Associutes com
Company Name Name of Parent Company (if Applicable)	Attendee's Name	Mailing Address
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Company Name Name of Parent Company (if Applicable)	Attendee's Name	Mailing Address