PROPOSERS' CONFERENCE
AVOCADO HEIGHTS, BASSETT, AND WEST VALINDA SHUTTLE SERVICE (2008-PA033)
LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS
MONDAY, JUNE 23, 2008, AT 3 P.M., ALHAMBRA ROOM

Please print clearly and leave your business card.

COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
Southland Transit Company Name Name ofParent Company (if Applicable)	Anne Perkins Attendee's Name Project Manager. title	Mailing Address: 3650 Rockwell City: El Monte State: CA Zip: 91731 Telephone Number: (626)-258-3382 FAX: ( ) E-Mail Address: aperkins@southlandtransit.com
First Transit Inc. Company Name Name ofParent Company (if Applicable)	Jim Andrew Attendee's Name Director, Business Develop title	Mailing Address: 1239 Big Canyon Place City: San Pedro State: CA Zip: 90732 Telephone Number: (310) 521-0265 FAX: 310) 521-0285 E-Mail Address: jim.andrew@firstgroupamerica.com
Company Name Name ofParent Company (if Applicable)	Attendee's Name title	Mailing Address: City: State: Zip: Telephone Number: ( ) FAX: ( ) E-Mail Address:
Company Name Name ofParent Company (if Applicable)	Attendee's Name title	Mailing Address: City: State: Zip: Telephone Number: ( ) FAX: ( ) E-Mail Address:
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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
PCAM LLC Company Name Parking co. of America Name of Parent Company (if Applicable)	Mario Cadenas Attendee's Name Project Manager Title	Mailing Address: 4975 Valley Blvd City: Los Angeles State: CA Zip: 90032 Telephone Number: (323) 987-6570 FAX: (323) 987-6578 E-Mail Address: mcadenas@parkpca.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:
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