AS-NEEDED VEHICLE AND EQUIPMENT REPAIR AND TOWING SERVICES PROGRAM (2009-AN013) LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS (TUESDAY, JULY 14, 2009), AT 9 A.M., ALHAMBRA – CONFERENCE ROOM B

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
Company Name Company Name Name of Parent Company (if Applicable)	TOM WILLIAMS Attendee's Name FLEET MANAGER Itle	Mailing Address: Zooo E GARVY AVE SOUTH City: West Courn State: CA Zip: 91791 Telephone Number: (626) 339-6214 FAX: (626) 967 5092. E-Mail Address:
Company Name Name of Parent Company (if Applicable)	Bruce Thorpe. Attendee's Name "Manyare itle	Mailing Address: ZOOOE GANLEY ALL SOUTH. City: West Covina State: CP Zip: 91291 Telephone Number: (126) 339-6216 FAX: (664) 9675092. E-Mail Address:
Company Name Name of Parent Company (if Applicable)	SCOTT HUGIE Attendee's Name OFFICE MANAGEL ITTE	Mailing Address: 1864 WOODLAWN ST City: UPLAND State: CA Zip: 91786 Telephone Number: 900, 614-4941 FAX: 900, 920-4557 E-Mail Address: SHUGIE @KELLY & UIPMENT - COM
KELLY EQUEMENT Company Name Name of Parent Company (if Applicable)	RAMON GOMEZ Attendee's Name FLEET/SHOP MANAGER IIIe	Mailing Address: 1884 WOODLAWN ST City: UPLAND State: CA ZID: 91786 Telephone Number: (909) 614-4942 FAX: (909, 920 4558) E-Mail Address: 4 Jones & Kelly & Quilment. Com
So Cal Truck Reparting Name United Road Town of Name of Parent Company (if Applicable)	Maurien Dolan Attendee's Name Sales	Mailing Address 25014 Cn2A Drive City: Valencia State: Ca Zip: 91355 Telephone Number: 6617021460 FAX: 6617021462 E-Mail Address: Molan & Unitedroad to Wins

AS-NEEDED VEHICLE AND EQUIPMENT REPAIR AND TOWING SERVICES PROGRAM (2009-AN013) LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS (TUESDAY, JULY 14, 2009), AT 9 A.M., ALHAMBRA – CONFERENCE ROOM B

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
ALL S. TARGLASS Company Name Name of Parent Company (if Applicable)	RONALD QUINGNES Attendee's Name SALES Tile	Mailing Address: 2927 & COLORAGO ST. City: PASACENA State: CA Zip: 9/107 Telephone Number: (3/0) 901-9239 FAX: () E-Mail Address: Young & Young & G. & G. & G. & Colorage Proposition (Colorage)
Tim Wells Tire Service Company Name Name of Parent Company (if Applicable)	Attendee's Name Manager Itle	Mailing Address: 45257 N Sierra Hwy City:
Company Name Name of Parent Company (if Applicable)	Bahram Baklshi Attendee's Name Manage	Mailing Address: 1483 5 Alame da City: LA State: CA Zip: 902 1 Telephone Number: (213)747-7575 FAX: (213) 747-7575 E-Mail Address: Zn+er city Tow 152 A.o.L.Com
CITY OF LONG BEACH Company Name Name of Parent Company (if Applicable)	Path' Mobile Attendee's Name Analyst	Mailing Address: 2600 Temple Ave. City: Long Beach State: CM Zip: 90806 Telephone Number: (562) 570-5403 FAX: (562) 570-5414 E-Mail Address: Patti. Mobile a long beach. 901
CITY OF LVP BOOKS Company Name Name of Parent Company (if Applicable)	Day Pamis Attendee's Name Syxthylerdera, Taly	Mailing Address: 311 E. WILLOW City: Long Reach State: CD Zip: 90806 Telephone Number: (562) 570-2826 FAX: (562-570-2841) E-Mail Address: CON: Namos Clong brach COV

AS-NEEDED VEHICLE AND EQUIPMENT REPAIR AND TOWING SERVICES PROGRAM (2009-AN013) LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS (TUESDAY, JULY 14, 2009), AT 9 A.M., ALHAMBRA – CONFERENCE ROOM B

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
Colden Hands Auto Body Company Name Name of Parent Company (if Applicable)	Gary Marmarian Attendee's Name Owner	Mailing Address: 17/ N Paricus d Ave City: Pasadena State: CA zip: 9/107 Telephone Number: (626) 577-6881 FAX: (626) 568-3/37 E-Mail Address: 9arymar@ Pacbelline L
ChT Facio Co Company Name Name of Parent Company (if Applicable)	Robert Thicstin	Mailing Address: 8130 ANG CON AND #30 City: VAN NUTS State: CA Zip: 9/406 Telephone Number: (8/8) 994-4377 FAX: () E-Mail Address: Rob Prstr & SBC Global Net
CALFORM A NODE TO DESTRUCTION COmpany Name Name of Parent Company (if Applicable)	KEYIM SHOOP Attendee's Name OWNER	Mailing Address: 8130 (ANFDON AVE 2D) City: VAN NUXS State: CA Zip: C11400 Telephone Number: (\$10) 725-1059 FAX: () E-Mail Address: TOBP FST CO S& CABAL, NET
MVPAUN Glass Company Name Name of Parent Company (if Applicable)	Peter Herrera Attendee's Name	Mailing Address: 2410 E Walnut St. City: Pasadene State: CA Zip: 91107 Telephone Number: (676) 578-7788 FAX: (620) 578-9815 E-Mail Address: Peter-map autoglass eyahor an
HAILBUN DIESEL & GQUIF. Company Name Name of Parent Company (if Applicable)	BAKKY EVANS Attendee's Name SAUCS MANABER IIIe	Mailing Address: 537 W. ANAHEIM ST. City: LONG BEACH State: QA ZID: 90813 Telephone Number: (562) 591-5665 FAX: (562) 591-2941 E-Mail Address: BARRYE@ GOHOI. COM

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
Rebilt metalizing Inc. Company Name // Prchars fylvanlizs Name of Parent Company (if Applicable)	Hugo Sancher Attendee's Name U.P.	Mailing Address: 2229 E. 38th St. City: Nev My State: GA Zip: 90058 Telephone Number: (323) 277 - 8200 FAX: (323 277-8203 E-Mail Address: Archar works @ Met scape net
Company Name Name ofParent Company (if Applicable)	Attendee's Name	Mailing Address:
Company Name Name ofParent Company (if Applicable)	Attendee's Name	Mailing Address:
Company Name Name ofParent Company (if Applicable)	Attendee's Name	Mailing Address:
Company Name Name ofParent Company (if Applicable)	Attendee's Name	Mailing Address: