

**PROPOSERS' CONFERENCE for
LANDSCAPE AND GROUNDS MAINTENANCE SERVICES (2013-PA014)
LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS
TUESDAY, DECEMBER, 17, 2013, AT 9 A.M., CONFERENCE ROOM B**

Please print clearly and leave your business card.

Page 1 of 1

COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
<u>CONESTO CREST</u> Company Name	<u>DAVID STEIN</u> Attendee's Name	Mailing Address: <u>16435 HANCOCK ST.</u> City: <u>LAN HILLS</u> State: <u>CA</u> Zip: <u>91406</u> Telephone Number: <u>(818) 988-9696</u> FAX: <u>(818) 988-4934</u> E-Mail Address: <u>DSTEIN@CONESTOCREST.COM</u>
<u>Far East Landscape</u> Company Name	<u>Tony Moon</u> Attendee's Name	Mailing Address: <u>P O BOX 950351</u> City: <u>WILSON HILLS</u> State: <u>CA</u> Zip: <u>91395</u> Telephone Number: <u>(661) 297-0918</u> FAX: <u>(661) 297-6272</u> E-Mail Address: <u>far-east@moon1@yahoo.com</u>
<u>United Pacific Services</u> Company Name	<u>Leo Ramirez</u> Attendee's Name	Mailing Address: <u>805 WILSON HILLS</u> City: <u>LA HAVEN</u> State: <u>CA</u> Zip: <u>90631</u> Telephone Number: <u>(562) 691-4600</u> FAX: <u>(562) 691-8888</u> E-Mail Address: <u>leo@unitedpacific.com</u>
<u>Valley Crest Landscape Maintenance</u> Company Name	<u>Joe Ventrucci</u> Attendee's Name	Mailing Address: <u>30051 EVERETT BLVD WILSON CT</u> City: <u>INWOOD OAKS</u> State: <u>CA</u> Zip: <u>91368</u> Telephone Number: <u>(805) 438-1177</u> FAX: <u>()</u> E-Mail Address: <u>jventrucci@valleycrest.com</u>
<u>Ucm 2109000</u> Company Name	<u>Manuel London</u> Attendee's Name	Mailing Address: <u>605 S WILSON BL</u> City: <u>LOS ANGELES CA</u> State: <u>CA</u> Zip: <u>90006</u> Telephone Number: <u>(213) 382-6455</u> FAX: <u>()</u> E-Mail Address: <u>Manuel.L@ucm2109000.com</u>

PROPOSERS' CONFERENCE for
LANDSCAPE AND GROUNDS MAINTENANCE SERVICES (2013-PA014)
LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS
TUESDAY, DECEMBER, 17, 2013, AT 9 A.M., CONFERENCE ROOM B

Please print clearly and leave your business card.

Page 2 of 4

COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
MAEIPUSA Company Name _____ Name of Parent Company (if Applicable) _____	Josh Cho Attendee's Name _____ Estimator Title _____	Mailing Address: 15529 Apple Hwy City: IRVINE State: CA Zip: 91706 Telephone Number: (626) 960 0196 FAX: (626) 960 3809 E-Mail Address: joshua@MAEIPUSA-CA.com
Greentech Landscaping, Inc. Company Name _____ Name of Parent Company (if Applicable) _____	Abel Chet and Hye Attendee's Name _____ Area Manager / Estimator Title _____	Mailing Address: 13560 Canyon Rd. City: Van Nuys State: CA Zip: 91411 Telephone Number: (818) 726-1962 FAX: (818) 727-1962 E-Mail Address: abel@greentechlandscaping.com
Valley Crest Landscaping Company Name _____ Name of Parent Company (if Applicable) _____	Sebastian Hernandez Attendee's Name _____ _____ Title _____	Mailing Address: 13015 S. Main St. City: Van Nuys State: CA Zip: 91411 Telephone Number: (818) 277-8200 FAX: (818) 277-8767 E-Mail Address: _____
Valley Crest Landscaping Company Name _____ Name of Parent Company (if Applicable) _____	David Mannix Attendee's Name _____ _____ Title _____	Mailing Address: 13015 S. Main St. City: Van Nuys State: CA Zip: 91411 Telephone Number: (818) 277-8200 FAX: (818) 277-8767 E-Mail Address: Dmannix@valleycrest.com
Thompson Landcare Company Name _____ Name of Parent Company (if Applicable) _____	George Melendez Attendee's Name _____ Account Manager Title _____	Mailing Address: 4134 Temple City Blvd City: ROSEMEAD State: CA Zip: 91770 Telephone Number: (909) 772-6365 FAX: (909) 772-6365 E-Mail Address: george.melendez@landcare.com

**PROPOSERS' CONFERENCE for
LANDSCAPE AND GROUNDS MAINTENANCE SERVICES (2013-PA014)
LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS
TUESDAY, DECEMBER, 17, 2013, AT 9 A.M., CONFERENCE ROOM B**

Please print clearly and leave your business card.

Page 3 of 4

COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
Socalland Maintenance Company Name	Steve Guiral Attendee's Name President Title	Mailing Address: 3000 E Comrade St City: Anaheim State: CA Zip: 92816 Telephone Number: (714) 231-1455 FAX: () E-Mail Address: Sguirale@socallm.com
Oakridge Landscape Company Name	Andre Bowerneats Attendee's Name Business Dev. Title	Mailing Address: 28064 Avenue Stanford 48K City: Valencia State: CA Zip: 91355 Telephone Number: (661) 295-7228 FAX: (661) 295-7230 E-Mail Address: Andre@oakridgelandscape.net
Valley First Landscape Company Name	Ashley Garrison Attendee's Name BUSINESS DEV Title	Mailing Address: 18015 S. MAIN ST City: GARDENA State: CA Zip: 90248 Telephone Number: (310) 327 8700 FAX: (310) 327 8767 E-Mail Address: A.garrison@valleyfirst.com
U.S. Metro Group, Inc Company Name	Henry Lee Attendee's Name GO TO GREEN Title	Mailing Address: 605 S. WILLOW PLARE City: Los Angeles State: CA Zip: 90005 Telephone Number: (213) 382-6435 FAX: (213) 382-6401 E-Mail Address: Henry.L@USMetroGroup.com
OTERO LANDSCAPE Company Name	Gaelo Otero Attendee's Name OWNER Title	Mailing Address: 6206 BURWOOD AVE City: LOS ANGELES State: CA Zip: 90042 Telephone Number: (323) 637-4488 FAX: () E-Mail Address: Oterolandscap@yahoo.com

PROPOSERS' CONFERENCE for
LANDSCAPE AND GROUNDS MAINTENANCE SERVICES (2013-PA014)
LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS
TUESDAY, DECEMBER, 17, 2013, AT 9 A.M., CONFERENCE ROOM B

Please print clearly and leave your business card.

Page 4 of 4

COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
<u>Tusgreen Landcare</u> Company Name	<u>JOE ESPINOZA</u> Attendee's Name <u>Branch Manager</u> Title	Mailing Address: <u>4134 Temple City Blvd</u> City: <u>Rosemead</u> State: <u>CA</u> Zip: <u>91770</u> Telephone Number: <u>(818) 402-2871</u> FAX: () E-Mail Address: <u>Joe.Espinoza@landcare.com</u>
<u>ISO</u> Company Name	<u>Renée Clark</u> Attendee's Name Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () FAX: () E-Mail Address: _____
<u>Amorin (can Heritage)</u> Company Name	<u>Arthur Perez</u> Attendee's Name <u>Manager</u> Title	Mailing Address: <u>1607 Luis Angeles #1</u> City: <u>Ventura</u> State: <u>CA</u> Zip: <u>93004</u> Telephone Number: <u>(818) 968-3187</u> FAX: () E-Mail Address: _____
Name of Parent Company (if Applicable) _____ Company Name _____ Name of Parent Company (if Applicable) _____	Attendee's Name _____ Title _____	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () FAX: () E-Mail Address: _____
Name of Parent Company (if Applicable) _____ Company Name _____ Name of Parent Company (if Applicable) _____	Attendee's Name _____ Title _____	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () FAX: () E-Mail Address: _____