## PROPOSERS' CONFERENCE

Please print clearly

COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
SITCLE CUCTUS ASSISTED	Jac track	Mailing Address:
Company Name	Attendee's Name	City:
Name of Parent Company (if Applicable)	Title	E-Mail Address:
Far East Londson	LOUN HOST	Mailing Address:
Company Name	Attendee's Name	City: State: Zip:
THE CONTRACTOR		Telephone Number: ( ) FAX: ( )
Name of Parent Company (if Applicable)	/ Title	E-Mail Address:
I and JARATIONS	Himas /	Mailing Address:
Company Name	, Attendee's Name	City: State: Zip:
		Telephone Number: ( ) FAX: ( )
Name of Parent Company (if Applicable)	) Title	E-Mail Address:
Landsc so & Durola man	Since Colorati	Mailing Address:
Comkany Nan	Attendee's Name	City:
		Telephone Number: ( ) FAX: ( )
Name of Parent Company (if Applicable)	Title	E-Mail Address:
United Rocalic Services	Leo Ramives	Mailing Address:
	Attendee's Name	City: State: Zip:
		Telephone Number: ( ) FAX: ( )
Name of Parent Company (if Applicable)	Title	E-Mail Address:

## LANDSCAPE AND SLOPE MAINTENANCE SERVICES FOR MONTELLANO SLOPE (2010-PA013) LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS PROPOSERS' CONFERENCE

**WALKTHROUGH SIGN IN** 

Please print clearly

Page Zof >

Name of Parent Company (if Applicable)		Company Name	Maxima Conserve by.	Name of Parent Company (if Applicable)		Company Name	Summer's Love.	Name of Parent Company (if Applicable)		Company Name	MARI POSA	Name of Parent Company (if Applicable)		Company Name	CHARREL LAND SCOR	Name of Parent Company (if Applicable)			Town LAWDECART	COMPANY NAME
Title	XX.	Attendee's Name	Moseus NXHIHARA	file	XeD.	ame	Erebiel Survey	Title	FRI MATOR	Attendee's Name	gest cto	Title		Attendee's Name	maching	Title		Attendee's Name	MONSH.ta	NAME OF PERSON ATTENDING
E-Mail Address:	Telephone Number: ( ) FAX: ( )	City: State: Zip:	Mailing Address:	E-Mail Address:	Telephone Number: (	City: State: Zip:	Mailing Address:	E-Mail Address:	Telephone Number: ( ) FAX: ( )	City: State: Zip:	Mailing Address:	E-Mail Address:	Telephone Number: () FAX: ()	City: State: Zip:	Mailing Address:	E-Mail Address:	Telephone Number: ( ) FAX: ( )	City: State: Zip:	Mailing Address:	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS

## LANDSCAPE AND SLOPE MAINTENANCE SERVICES FOR MONTELLANO SLOPE (2010-PA013) LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS **PROPOSERS' CONFERENCE** WALKTHROUGH SIGN IN

Ple

ease print clearly		Page $3$ of $3$
COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
Noch Edet Tess	LEGAT WILLOW	Mailing Address:
Company Name	Attendee's Name	City: State: Zip:
Name of Parent Company (if Applicable)	Sergio Correcto.	Telephone Number: ( ) FAX: ( )
Survice Scape	Supio CARTA-	Mailing Address:
Company Name	Attendee's Name	City: State: Zip:

E-Mail Address:	Title E-Ma	Name of Parent Company (if Applicable)
Telephone Number: ()FAX: (	Telep	
State:	Attendee's Name City:	Company Name
Mailing Address:	Mailir	
E-Mail Address:	Title E-Ma	Name of Parent Company (if Applicable)
Telephone Number: () FAX: (	Telep	
State:	Attendee's Name	Company Name
Mailing Address:	Refull Carrier Mailin	Trivaring land
E-Mail Address:	Title E-Ma	Name of Parent Company (if Applicable)
Telephone Number: () FAX: (	Telep	
State:	Attendee's Nam	Company Name
Mailing Address:	, FRANCISCO SANCIST	Tinner CARNSUS IN
E-Mail Address:	Title E-Ma	Name of Parent Company (if Applicable)
Telephone Number: ( FAX: (	Telep	
State:	ndee's N	Company Name
Mailing Address:	Sextain Mailir	San VICE SCADO
E-Mail Address:	A Title E-Ma	Name of Parent Company (if Applicable)
Telephone Number: ( ) FAX: (	Telep	CRAVICE CLADE
State:	Attendee's Name City:	Company Name
Mailing Address:	Mailin	Macili rus Vien Vrass