

PROPOSERS' CONFERENCE
(GRAFFITI REMOVAL SERVICES ZONE 5 – SOUTH COUNTY)
LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS
(MONDAY, MAY 12, 2014), AT 9:30 A.M., CONFERENCE ROOM A

Please print clearly and leave your business card.

Page 1 of 3

COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
<u>Custom Wood Finishing</u> Company Name Name of Parent Company (if Applicable)	<u>ARMAN Solimani</u> Attendee's Name Title	Mailing Address: <u>20555 Devonshire #168</u> City: <u>Chatsworth</u> State: <u>CA</u> Zip: <u>91311</u> Telephone Number: <u>(818) 259-0065</u> FAX: <u>(818) 239-4881</u> E-Mail Address: <u>Customwood Finishing @Gmail.com</u>
<u>Sum Village Chamber of Commerce</u> Company Name <u>White Construction</u> Name of Parent Company (if Applicable)	<u>ERROL W. L. WALL</u> Attendee's Name Title	Mailing Address: <u>Sum Village Chamber of Commerce</u> City: <u>Sum Village</u> State: <u>CA</u> Zip: <u>91315 43</u> Telephone Number: <u>(441) 674 2323</u> FAX: <u>()</u> E-Mail Address: <u>22022 @ Yahoo.com</u>
<u>Daniel Mobley</u> Company Name <u>Sum Village Chamber of Commerce</u> Name of Parent Company (if Applicable)	<u>Daniel Mobley</u> Attendee's Name Title	Mailing Address: <u>44356 23rd St West</u> City: <u>Lancaster Eng CA</u> State: <u>CA</u> Zip: <u>93533</u> Telephone Number: <u>()</u> FAX: <u>()</u> E-Mail Address: <u>()</u>
<u>Graffiti Control Systems</u> Company Name <u>Wood's Maintenance Services, Inc</u> Name of Parent Company (if Applicable)	<u>JOSE WOODS</u> Attendee's Name Title	Mailing Address: <u>7260 Atoll Ave</u> City: <u>N. Hollywood</u> State: <u>CA</u> Zip: <u>91605</u> Telephone Number: <u>(818) 7642515</u> FAX: <u>(818) 7642516</u> E-Mail Address: <u>JWOODS @ GRAFFITI CONTROL.COM</u>
<u>Cam Painting, Inc</u> Company Name Name of Parent Company (if Applicable)	<u>Petrus Polycurpo</u> Attendee's Name Title	Mailing Address: <u>29 Hackamore Ln</u> City: <u>Bell Canyon</u> State: <u>CA</u> Zip: <u>91307</u> Telephone Number: <u>(818) 716-7410</u> FAX: <u>(818) 716-7443</u> E-Mail Address: <u>CamPainting @Sbcglobal.net</u>

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
SUPERIOR PROPERTY SERVICES Company Name Name of Parent Company (if Applicable)	CHRIS BRENNICK Attendee's Name SUPERVISOR Title	Mailing Address: <u>9129 PERKINS</u> City: <u>RICO RIVERA</u> State: <u>CA</u> Zip: <u>90660</u> Telephone Number: <u>(362) 801-9200</u> FAX: <u>(362) 801-9230</u> E-Mail Address: <u>CHRIS@4SUPERIOR.COM</u>
MARIO'S PAINTING Company Name Name of Parent Company (if Applicable)	MARIO MARRUCCI Attendee's Name PAINTER Title	Mailing Address: <u>36668 Spanish Brown Dr</u> City: <u>PALMDALE</u> State: <u>CA</u> Zip: <u>91350</u> Telephone Number: <u>(661) 736-3348</u> FAX: <u>()</u> E-Mail Address: <u>MARIO.MARRUCCI@GMAIL.COM</u>
Cotton Graffiti Ents Company Name Name of Parent Company (if Applicable)	Alvaro Cobenz Attendee's Name ADMINISTRATOR Title	Mailing Address: <u>Managablent Graffiti.com</u> City: <u>2022 23838</u> State: <u>CA</u> Zip: <u>91722</u> Telephone Number: <u>(626) 855-4940</u> FAX: <u>(626) 855-4949</u> E-Mail Address:
SURETECH INC. Company Name Name of Parent Company (if Applicable)	NICHOLE MARRINER Attendee's Name DISPATCH TECH Title	Mailing Address: <u>810 E. Cottonwood St</u> City: <u>Ontario</u> State: <u>CA</u> Zip: <u>91761</u> Telephone Number: <u>(909) 532-4144</u> FAX: <u>()</u> E-Mail Address: <u>dispatch@suretech.com</u>
Suretek Inc Company Name Name of Parent Company (if Applicable)	Dennis Martinez Attendee's Name Office Manager Title	Mailing Address: <u>800 E. Cottonwood St</u> City: <u>Ontario</u> State: <u>CA</u> Zip: <u>91761</u> Telephone Number: <u>(909) 532-4144</u> FAX: <u>()</u> E-Mail Address: <u>suretek@suretek.com</u>

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SURETECK Company Name _____ Name of Parent Company (if Applicable) _____	SALVILLOBAS Attendee's Name _____ Title _____	Mailing Address: 8946 GALLATIN RD City: PICO RIVERA State: CA Zip: 90660 Telephone Number: (562) 843-5690 FAX: () E-Mail Address: SALV-UNO@YAHOO.COM
Coalition for Responsible Community Development Company Name _____ Name of Parent Company (if Applicable) _____	JOE GAMER Attendee's Name _____ Title Co-Director of Painting Search	Mailing Address: 3101 S. GILMAN AVE City: Los Angeles State: CA Zip: 90007 Telephone Number: (213) 743-6193 FAX: (213) 743-6198 E-Mail Address: jgamer@coalitioncd.org
LRCD ENTERPRISES 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: _____
Company Name _____ Name of Parent Company (if Applicable) _____	Attendee's Name _____ Title _____	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () () () FAX: () () E-Mail Address: _____