

**PROPOSERS' CONFERENCE
WATER TRUCK SERVICES (BRC0000048)
LOS ANGELES COUNTY PUBLIC WORKS
TUESDAY, FEBRUARY 12, 2019, AT 9 A.M.**

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>Spadaro Ent Inc</u> Company Name	<u>Brian Keyes</u> Attendee's Name <u>Director of Operations</u> Title	Mailing Address: <u>42612 9th Street West</u> City: <u>Lawndale</u> State: <u>CA</u> Zip: <u>93534</u> Telephone Number: <u>(661) 940-1914</u> FAX: <u>()</u> E-Mail Address: <u>general.officer@spadaro-inc.com</u>
<u>Spadaro Enterprises Inc</u> Company Name	<u>Susan Stessman</u> Attendee's Name <u>Accounting</u> Title	Mailing Address: <u>42612 9th St, West</u> City: <u>Lawndale</u> State: <u>CA</u> Zip: <u>93534</u> Telephone Number: <u>(661) 940-1914</u> FAX: <u>(661) 940-8022</u> E-Mail Address: <u>Spadaroacts@gmail.com</u>
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: _____