

**PROPOSERS' CONFERENCE**  
**PUBLIC CURBSIDE CONTAINER COLLECTION AND DISPOSAL SERVICES FOR RMD 3 AREA (2011-AN045)**  
**LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS**  
**THURSDAY, SEPTEMBER 29, 2011, AT 1 P.M., CONFERENCE ROOM A**

Please print clearly and leave your business card.

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
<u>SHELTERCLEAN</u> Company Name  Name of Parent Company (if Applicable)	<u>Rafael Mendez</u> Attendee's Name  <u>OPERATIONS MANAGER</u> Title	Mailing Address: <u>2475 Lemon Ave</u> City: <u>SIGNAL HILL</u> State: <u>CA</u> Zip: <u>90755</u> Telephone Number: <u>(562) 595-6166</u> FAX: <u>(562) 595-6196</u> E-Mail Address: <u>ymendez@shelterclean.com</u>
<u>Ware Disposal Co</u> Company Name  Name of Parent Company (if Applicable)	<u>Brad Timmons/Seemysen</u> Attendee's Name  <u>Sales Manager</u> Title	Mailing Address: <u>P.O. Box 8089</u> City: <u>Newport Beach</u> State: <u>CA</u> Zip: <u>92658</u> Telephone Number: <u>(714) 661-0677</u> FAX: <u>(714) 661-0696</u> E-Mail Address: <u>Brad@waredisposal.com</u>
<u>United Pacific Waste &amp; Recycling</u> Company Name  Name of Parent Company (if Applicable)	<u>Zohrab Mouradian</u> Attendee's Name  <u>Sales Manager</u> Title	Mailing Address: <u><del>PO BOX 4320</del> San Gabriel Rvr Parkway</u> City: <u>Pico Rivera</u> State: <u>CA</u> Zip: <u>90660</u> Telephone Number: <u>(562) 699-7600</u> FAX: <u>(562) 908-2111</u> E-Mail Address: <u>ZohrabM@UPWRS.COM</u>
<u>Waste Management</u> Company Name  Name of Parent Company (if Applicable)	<u>LILY LEE</u> Attendee's Name  <u>Public Affairs Mgr.</u> Title	Mailing Address: <u>9081 Tujunga Avenue</u> City: <u>Sun Valley</u> State: <u>CA</u> Zip: <u>91352</u> Telephone Number: <u>(818) 252-3106</u> FAX: <u>( )</u> E-Mail Address: <u>llee@wm.com</u>
<u>Republic Services</u> Company Name  Name of Parent Company (if Applicable)	<u>Juan Rodriguez</u> Attendee's Name  <u>Operations Manager</u> Title	Mailing Address: <u>14905 S. San Pedro St</u> City: <u>Gardena</u> State: <u>CA</u> Zip: <u>90248</u> Telephone Number: <u>(310) 436-7328</u> FAX: <u>( )</u> E-Mail Address: <u>JRODRIGUEZ6@republicservices.com</u>

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
<u>Shelter Clean Inc.</u> Company Name  Name of Parent Company (if Applicable)	<u>ALFREDO PEREZ</u> Attendee's Name  <u>Field Supervisor</u> Title	Mailing Address: <u>3475 Lemoine AVE</u> <u>Alfred@shelterclean.com</u> City: <u>Signal Hill</u> State: <u>CA</u> Zip: <u>90255</u> Telephone Number: <u>(562) 595-6166</u> FAX: <u>(562) 595-6196</u> E-Mail Address: <u>aperez@shelterclean.com</u>
<u>Calmet Services Inc.</u> Company Name  Name of Parent Company (if Applicable)	<u>ANDRE MARTINEZ</u> Attendee's Name  <u>Business Development</u> Title	Mailing Address: <u>7202 PETERSON LN. P.O. Box 2137</u> City: <u>Paramount</u> State: <u>CA</u> Zip: <u>90723</u> Telephone Number: <u>(526) 259-1239</u> FAX: <u>( )</u> E-Mail Address: <u>amartinez@calmet-services.com</u>
<u>NUWAY ROLL-OFF SVC</u> Company Name  Name of Parent Company (if Applicable)	<u>ED MORALES</u> Attendee's Name  <u>PARTNER</u> Title	Mailing Address: <u>145 W. DUARTE RD</u> City: <u>MONROVIA</u> State: <u>CA</u> Zip: <u>91016</u> Telephone Number: <u>(626) 358-8007</u> FAX: <u>(626) 358-9292</u> E-Mail Address: <u>NUWAYROLLOFFSERVICE@YAHOO.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: _____