

PROPOSERS' CONFERENCE

WATER QUALITY FUNDING INITIATIVE - FLOOD CONTROL DISTRICT PARCEL OWNER ELECTION

(2012-AN002)

LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS

Monday, November 14, 2011, at 2:00 p.m.

Administrative Services Division, 9th Floor Conference Room

Please print clearly and leave your business card.

Page 1 of 2

COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
<u>True Bullock</u> Company Name <u>N/A</u> Name of Parent Company (if Applicable)	<u>Jeff Freitas</u> Attendee's Name <u>Election Administrator</u> Title	Mailing Address: <u>301 W. 18th St.</u> City: <u>Merced</u> State: <u>CA</u> Zip: <u>95340</u> Telephone Number: <u>(209) 735-3379</u> FAX: <u>()</u> E-Mail Address: <u>jeff@truebullock.com</u>
<u>Martin Chapman Co.</u> Company Name <u></u> Name of Parent Company (if Applicable)	<u>Pat Martin Bonaventura</u> Attendee's Name <u>VP + IT</u> Title	Mailing Address: <u>301</u> City: <u></u> State: <u></u> Zip: <u></u> Telephone Number: <u>()</u> FAX: <u>()</u> E-Mail Address: <u></u>
<u>MSI/Hart Inter Civic</u> Company Name <u>HART INTER CIVIC</u> Name of Parent Company (if Applicable)	<u>John Millet</u> Attendee's Name <u>VP SALES</u> Title	Mailing Address: <u>2431 Mercantile Dr See A</u> City: <u>Paso Robles</u> State: <u>CA</u> Zip: <u>95742</u> Telephone Number: <u>(916) 631-7400</u> FAX: <u>(916) 631-7488</u> E-Mail Address: <u>jmillet@msi-mail.com</u>
<u></u> Company Name <u></u> Name of Parent Company (if Applicable)	<u></u> Attendee's Name <u></u> Title	Mailing Address: <u></u> City: <u></u> State: <u></u> Zip: <u></u> Telephone Number: <u>()</u> FAX: <u>()</u> E-Mail Address: <u></u>
<u></u> Company Name <u></u> Name of Parent Company (if Applicable)	<u></u> Attendee's Name <u></u> Title	Mailing Address: <u></u> City: <u></u> State: <u></u> Zip: <u></u> Telephone Number: <u>()</u> FAX: <u>()</u> E-Mail Address: <u></u>

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<u>Election-America</u> Company Name _____ Name of Parent Company (if Applicable)	<u>Michael D Fetter</u> Attendee's Name <u>Election Partner</u> Title	Mailing Address: <u>525 B st. Ste 1500</u> City: <u>San Diego</u> State: <u>CA</u> Zip: <u>92101</u> Telephone Number: <u>(866) 514-2995</u> FAX: () E-Mail Address: <u>Sales@Election-America.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)	<u>EM</u> 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: _____