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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
Brown Marketing Stratege Company Name Name of Parent Company (if Applicable)	<u>Shannen Brawn</u> Attendee's Name <u>Principal</u> Title	Mailing Address: 1889 Bacin Street #8 City: <u>San Dreap</u> State: <u>CA</u> zip: <u>92107</u> Telephone Number: <u>(1619)</u> 5465390 FAX: <u>(619)</u> 546 <b>9</b> 790 E-Mail Address: <u>Shannan Ebrown marketing strategies</u> , <u>com</u>
Brown Marketing Strategies Company Name Name of Parent Company (if Applicable)	Stacie Tharp Attendee's Name Public Relations Coordinator Title	Mailing Address: 1889 Bacon Street, Svite 8 City: <u>San Diego</u> state: <u>CH</u> zip: <u>92107</u> Telephone Number: <u>619</u> , 546-5390 AX: <u></u> E-Mail Address: <u>Stacie@brownmarketingstrateges</u> . Con
Name of Parent Company (if Applicable)	CHMIS LANCOSTER Attendee's Name UICE President Title	Mailing Address:       3355 N. WHITE AVE H374         City:       LAVEME         State:       CH         Telephone Number:       909 ) 524-8952 FAX:         E-Mail Address:       CHUS, CAUCASTEL 6 CIVIC AUS. Caucastel 6 Civic 6 Ci
MAKE Over EDITHis Company Name	<u>CAM Polakovic</u> Attendee's Name <u>president</u> Title	Mailing Address: <u>4905 Wioth St.</u> City: <u>L'A</u> State: <u>CA</u> zip: <u>90071</u> Telephone Number: <u>618795-1764</u> FAX: <u>)</u> E-Mail Address: <u>9040 Mile aver earth</u> : <u>con</u>
Rep Dot Disson Company Name R. P. Technolog Solution Fre Name of Parent Company (if Applicable)	John IRVine Attendee's Name President Title	Mailing Address: 333 EL CAMWO REAL City: TUSTW State: CA Zip: 92780 Telephone Number: (727) 800 -542-1245 E-Mail Address: JDNW @ 5 dock design Com

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
D'ROYKL Company Name Name of Parent Company (if Applicable)	Abbi Hertz Attendee's Name Sv. Accoupt Supervise	Mailing Address: 226 S. Beverly DY SULE 214 City: Beverly Hills state: CA Zip: 90212 Telephone Number: 310, 557-3010 FAX: () E-Mail Address: Abi @ Dr Dr Ke IMC, CDM
Name of Parent Company (if Applicable)	Rachel Zaokopny Attendee's Name Acct Covolinator Title	Mailing Address:       State:       State:       Zip:         City:
Name of Parent Company (if Applicable)	Attendee's Name Sr. Activisor	Mailing Address: 18845 Olympic Bluch # 645 City: Los Angeles State: CA Zip: 90064 Telephone Number: (310) 815-8444 FAX: (310) 815-8414 E-Mail Address: nicole @ dakcomm.com
Name of Parent Company (if Applicable)	Adam Quinn Attendee's Name Project (pordinator	Mailing Address:       100       WEST       BROADWAY       SUITE 290         City:       LONG       BEACH       State:       CA       Zip:       90802         Telephone Number:       (S62)       597-0205       FAX:       ()         E-Mail Address:       AQUINNQ       SGA - INC · NET
Name of Parent Company (if Applicable)	Jan Yerzik Attendee's Name Program Mgr.	Mailing Address: 18851 Bandoon Sto 225 City: Invine State: CA Zip: 92612 Telephone Number: 949, 752-8680 FAX: () E-Mail Address: 192021K @ Op4-fpg, COM

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
KPEA (Bassociates) Company Name	Thelmz Herrera Attendee's Name	Mailing Address: 440 Tamarae Dr         City: Pasa Jens         State: CA         Zip: 91105         Telephone Number: (323) 258-5384
Name of Parent Company (if Applicable)	<u>Gr. PM Ovestive Dur Due tré</u> Title	E-Mail Address: therrara @katherivepadilla. am
MBI MEDIA Company Name	TAYLOR I HAMLETT	Mailing Address:       957 S VILLAGE OAKS DK         City:       COVINA         State:       CA
Name of Parent Company (if Applicable)		Telephone Number:       (626)967-1510       FAX:       (         E-Mail Address:       TITAMCETT       (COMB)       MEDIA. COM
Phelps	Alex Perez	Mailing Address: 901 Wilshire BIVD
Company Name	Attendee's Name	City: <u>Savita</u> <u>Morulica</u> State: <u>CH</u> Zip: <u>9040</u> Telephone Number: <u>(3/0)</u> 752 4506 FAX: (
Name of Parent Company (if Applicable)	Title	E-Mail Address: aperezophelps Agency com
FRASER COMMUNICATION	Dentis Wolcott Attendee's Name	Mailing Address: $1651$ FUNTIUS AVE City: $LOA$ ANGOLOS State: $OF$ Zip: $90025$ Telephone Number: $(213)$ $200-1563$ FAX: $(310)$ $319-1537$ Deliver of the state of the
Name of Parent Company (if Applicable)	Title	E-Mail Address: DWULCON (R) FRASER COMMUNICATIONS
Kearns & West Company Name	Eva Behrend Attendee's Name	Mailing Address: 1340 Canborn Ave City: <u>10-S</u> Angeles state: <u>CA</u> zip: <u>90027</u> Telephone Number: <u>(323)</u> <u>839</u> 939 FAX: (
Name of Parent Company (if Applicable)	Title	E-Mail Address: Chehrend & Kearnswest . Can

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
<u>Alabal Energy Services</u> Company Name Name of Parent Company (if Applicable)	Saori Yoshino Attendee's Name Program Manages Title	Mailing Address: 23341 Golden Springs Dr. #108         City: Diamond Bar       State: CA       Zip: 91765         Telephone Number: (209) 860-5300       FAX: (709) 860-5353         E-Mail Address: Saori. YSU @gmail.com
CCYVELI ASSIC Company Name Name of Parent Company (if Applicable)	MACARIA FLOVES Attendee's Name VP Title	Mailing Address: 320 N- LAVCHMONT BLM. City: LA State: A Zip: 90004 Telephone Number: 323, 465 3445 FAX: 323, 465 8053 E-Mail Address: MOCAVIA & CEVRELL. (OM)
<u>Lazar &amp; Assoc</u> <u>Company Name</u> <u>Thuns/atton Services Inc.</u> Name of Parent Company (if Applicable)	Jamie Goldenson Attendee's Name Mktg. Managere Title	Mailing Address:       15/6       S.       Bundly       Dr.       # 3/1         City: <u>LOS ANGE/ES</u> State: <u>CIA</u> zip: <u>90025</u> Telephone Number: <u>310</u> <u>953-3392</u> EAX: <u>310</u> <u>453-6002</u> E-Mail Address: <u>JOMIC</u> <u>QUICZCIA</u> <u>COM</u>
DAKELUNA Consultants Company Name GDML (AUDINGS Name of Parent Company (if Applicable)	MIGUEL LUNA Attendee's Name Principal Title,	Mailing Address: 535 N. EUCLID Aven City: LOS Angelon State: CA Zip: 90063 Telephone Number: &17,568-9139FAX: () E-Mail Address: MIGVELODAKELUNA, (OM
Biscontractors The Company Name Name of Parent Company (if Applicable)	Attendee's Name Pres. Title	Mailing Address: 201,36 State RN. City: <u>Crri70S</u> State: <u>CA</u> Zip: <u>10703</u> Telephone Number: <u>503 203-2521</u> FAX: <u>563 402-3551</u> E-Mail Address: <u>Diblon/rdcfunstvykh&amp;</u> Com

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
PASSANTINO ANDERSANCOMM. Company Name	DAVID SUCTMAN Attendee's Name	Mailing Address: 42305 10th STRAGT WIST City: TOTOT LANGASTER State: (A Zip: 93534
Name of Parent Company (if Applicable)	SENIOR ACCOUNT EXECUTIVE	
GABOSN METHA (REATION) Company Name	ARMANDO SACAS Attendee's Name	Mailing Address:       173       1144       5       CMAND       AUE         City:       GLEMDIRA       State:       (1144)       210       210         Telephone Number:       626, 320-8703       FAX:       (1144)       1144
Name of Parent Company (if Applicable)	DIMETTOM	E-Mail Address: <u>Cosalas@greenmedia Creations, Com</u>
Lee Andrews Group Juc, Company Name	Attendee's Name Disector of Business Development	Mailing Address: 818 W. 7th St. Ste. 750 City: Los Angeles state: CA zip: 90012 Telephone Number: (213)891-2965 FAX: (23)891-9016 E-Mail Address: Ubrown @ Lecandrews growp, CAM
GOWEZ Research	Sophia Gomez Attendee's Name	Mailing Address: MUVA Segue City: 225'5 Lake Are, State: CA Zip: 9/101
Name of Parent Company (if Applicable)	President, WBE market Research	Telephone Number: (6)() 795-9880 FAX: () E-Mail Address: <u>SODNACGOMEZVESEAVCH, NEF</u>
DINNED & ASSOC	T. ? Ellman Attendee's Name	Mailing Address: 2009 Century Park East # 12 City: LA State: CA Zip: 90067
MSLGroupE Name of Parent Company (if Applicable)	Title	Telephone Number: (3/0) (43) - 7776AX: (3/0) (43) - 7777         E-Mail Address:
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