

PROPOSERS' CONFERENCE

Landscape Maintenance Services South Area (2014-PA030)
LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS

Thursday, November 20, 2014, at 2 p.m. at Public Works Headquarters, 900 South Fremont Avenue, Alhambra, California 91803, in 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
Landscape West Management Services Inc Company Name	Stacy Kontler Brithin Attendee's Name President Title	Mailing Address: 3628 County Road City: Chino State: CA Zip: 91710 Telephone Number: 909 627 7507 FAX: 909 627 8600 E-Mail Address: Stacy@lwnsinc.com
Pierre Landscape, Inc Company Name	Hopi Roark Attendee's Name Business Development Title	Mailing Address: 4785 East Los Angeles Ave. City: Simi Valley State: CA Zip: 91359 Telephone Number: 818 4679-7742 FAX: 805 416-1059 E-Mail Address: HRoark@pierelandscape.com
CONVESCO CARES Company Name	DAVID STEIN Attendee's Name	Mailing Address: 16435 HART ST City: VAN NUYS State: CA Zip: 91406 Telephone Number: 818 988-9694 FAX: 818 988-4934 E-Mail Address: DSTEIN@CONVESCO CARES.COM
Valley West Landscape Company Name	Abby Swartzlander Attendee's Name BUSINESS DEVELOPMENT Title	Mailing Address: 17813 S MAIN STREET UNIT # 105 City: GRANADA State: CA Zip: 91248 Telephone Number: 310 678 0402 FAX: () E-Mail Address: ASWARTZLANDER@VALLEYWEST.COM
Orozco Landscape Company Name	Johnathan Orozco Attendee's Name	Mailing Address: 1419 S East End Avenue City: Pomona State: CA Zip: 91766 Telephone Number: 909 623 8257 FAX: 909 469 0634 E-Mail Address:

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
May 1905A Company Name	Joshua Cato Attendee's Name ESTIMATOR Title	Mailing Address: 15529 Arrow Hwy City: RIVERSIDE State: CA Zip: 91706 Telephone Number: 661-960-0196 FAX: 661-960-3809 E-Mail Address: joshua@maypost.com
Powerland Equipment Company Name	Simon Smith Attendee's Name Contracting Title	Mailing Address: 27743 Valley Center Rd City: Valley Center State: CA Zip: 92082 Telephone Number: 760-749-1271 FAX: 760-749-7415 E-Mail Address: www.powerlandequipment.com
Marina Landscape Company Name	Jose Valera Attendee's Name Supervisor Title	Mailing Address: 7333 Clyburn Ave City: San Valley State: CA Zip: 91041 Telephone Number: (818) 307-3737 FAX: () E-Mail Address: jv45922@marina.com
United Pacific Services Company Name	Jack Moorins Attendee's Name General Manager Title	Mailing Address: 120 E LATHAM BLVD Suite 107 City: LATHAM State: CA Zip: 90631 Telephone Number: 562-691-4600 FAX: 562-691-8839 E-Mail Address: gus@unitedpac.com
Valley Crest Company Name	David Manna Attendee's Name Estimator Title	Mailing Address: 18015 S Main St City: Gardena State: CA Zip: 90248 Telephone Number: () FAX: () E-Mail Address: Dmanna@valleycrest.com

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
<u>Exceland Care</u> Company Name	<u>Gus Ceballos</u> Attendee's Name _____ Title	Mailing Address: <u>155431 Vintage Street</u> City: <u>MISSION Hills</u> State: <u>CA</u> Zip: <u>91345</u> Telephone Number: <u>(618) 845-3871</u> FAX: <u>(818) 895-3871</u> E-Mail Address: <u>Exceland.Care@hotmail.com</u>
<u>Stay Green</u> Company Name	<u>Steve Seely</u> Attendee's Name _____ Title	Mailing Address: <u>26415 Summit Circle</u> City: <u>Santa Clarita</u> State: <u>CA</u> Zip: <u>91350</u> Telephone Number: <u>(661) 291-2800</u> FAX: <u>()</u> E-Mail Address: <u>ssseely@staygreen.com</u>
_____ Company Name	_____ Attendee's Name _____ Title	 Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () () () FAX: () () E-Mail Address: <u>EM</u>
_____ Company Name	_____ Attendee's Name _____ Title	 Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () () () FAX: () ()
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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
QST _____ Company Name	Justin Casey Attendee's Name GM Title	Mailing Address: 1549 W. 17 th St City: Long Beach State: CA Zip: 90813 Telephone Number: (562) 376 5177 FAX: (E-Mail Address: justincasey.qst@qsmail.com
OTERO LANDSCAPE _____ Company Name	JUAN OTERO Attendee's Name Title	Mailing Address: L.A. City: L.A. State: CA Zip: 90042 Telephone Number: (818) 795-9315 FAX: (E-Mail Address: OTEROLANDSCAPE.YAHOO.COM
_____ Company Name	_____ Attendee's Name Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () FAX: () E-Mail Address: _____
_____ Company Name	_____ Attendee's Name Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () FAX: () E-Mail Address: _____
_____ Company Name	_____ Attendee's Name Title	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () FAX: () E-Mail Address: _____
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