

**WALK-THROUGH
OPERATING FOOD AND VENDING MACHINE SERVICES (2011-PA007)
LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS
(TUESDAY, MAY, 10, 2011), AT _____ P.M., CAFETERIA**

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>California Dining Services</u> <small>Company Name</small> <hr/> <small>Name of Parent Company (if Applicable)</small>	<u>Joe Melendez</u> <small>Attendee's Name</small> <u>Executive Chef</u> <small>Title</small>	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () _____ FAX: () _____ E-Mail Address: _____
<u>Lunch Stop Inc</u> <small>Company Name</small> <hr/> <small>Name of Parent Company (if Applicable)</small>	<u>Wayne S Goulding Sr</u> <small>Attendee's Name</small> <u>CEO</u> <small>Title</small>	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () _____ FAX: () _____ E-Mail Address: _____
<u>TJ Parnley</u> <small>Company Name</small> <hr/> <small>Name of Parent Company (if Applicable)</small>	<u>Theresa Jagan</u> <small>Attendee's Name</small> <hr/> <small>Title</small>	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () _____ FAX: () _____ E-Mail Address: _____
<u>TRIMARK</u> <small>Company Name</small> <hr/> <small>Name of Parent Company (if Applicable)</small>	<u>Bi Tan Ladegar</u> <small>Attendee's Name</small> <u>Director of Development</u> <small>Title</small>	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () _____ FAX: () _____ E-Mail Address: _____
<u>Bill Anderson Pacific Vending</u> <small>Company Name</small> <hr/> <small>Name of Parent Company (if Applicable)</small>	<u>Bill Anderson</u> <small>Attendee's Name</small> <hr/> <small>Title</small>	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: () _____ FAX: () _____ E-Mail Address: _____