PROPOSERS' CONFERENCE
AS-NEEDED EQUIPMENT CALIBRATION, MAINTENANCE, AND REPAIR (2014-AN028)
LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS
WEDNESDAY, JUNE 25, 2014, AT 9 A.M., ALHAMBRA ROOM

Please print clearly and leave your business card.

COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
A-CAL / Associated Calib INC Company Name Name of Parent Company (if Applicable)	JERRY SCHWARZ Attendee's Name Pres Title	Mailing Address: 4583 E Eisenhower CR. City: Anaheim State: CA Zip: 92807 Telephone Number: (714) 696 5300 FAX: ( ) E-Mail Address: Jerry S @ A-CAL inc .com
Associated CALIBRATION, Inc Company Name DBA A-CAL Name of Parent Company (if Applicable)	Jan Schwarz Attendee's Name V.P Title	Mailing Address: 4583 E. Eisenhower CIR City: Anaheim State: CA Zip: 92807 Telephone Number: (714) 696-5300 FAX: ( ) E-Mail Address: JANS @ A-CALINC.com
Technical Assoc. Service Company Name Name of Parent Company (if Applicable)	Terry Sumner Attendee's Name Title	Mailing Address: 7832 Franklin City: Hunt Bch State: CA Zip: 92648 Telephone Number: (714) 841-0475 FAX: ( ) E-Mail Address: anton @ tascalibration.com
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: