

**BIDDERS' CONFERENCE**  
**LANDSCAPE AND GROUNDS MAINTENANCE SERVICES FOR SIX LOCATION GROUPS (BRC0000084)**  
**LOS ANGELES COUNTY PUBLIC WORKS**  
**THURSDAY, OCTOBER 17, 2019, AT 1 P.M., CONSTRUCTION CONFERENCE ROOM, 8TH FLOOR**

Please print clearly and leave your business card.

Page 1 of 3

COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
<b>01202CO Landscape &amp; Tree Company</b> Company Name  Name of Parent Company (if Applicable)	<b>Robert Cisneros</b> Attendee's Name  <b>MGR</b> Title	Mailing Address: <b>1419 S. EAST END AVE.</b> City: <b>POMONA</b> State: <b>CA</b> Zip: <b>91766</b> Telephone Number: <b>(909) 623-8287</b> FAX: ( ) E-Mail Address: <b>robert@01202colandscape.com</b>
<b>COMPLETE LANDSCAPE CARE</b> Company Name  Name of Parent Company (if Applicable)	<b>RICH HERNANDEZ</b> Attendee's Name  <b>GEN MANAGER</b> Title	Mailing Address: <b>13316 LAFFIN AVE. RD</b> City: <b>WHITTIER</b> State: <b>CA</b> Zip: <b>90605</b> Telephone Number: <b>(562) 946-4441</b> FAX: ( ) E-Mail Address: <b>RHERNANDEZ@CLCAREINC.CO</b>
<b>Martinez Landscape Co. I</b> Company Name  Name of Parent Company (if Applicable)	<b>Justine Suarez</b> Attendee's Name  <b>Office Clerk</b> Title	Mailing Address: <b>12357 San Fernando Rd.</b> City: <b>Sylmar</b> State: <b>CA</b> Zip: <b>91342</b> Telephone Number: <b>(818) 364-9188</b> FAX: ( ) E-Mail Address: <b>diana@martinezlandscape.com</b>
<b>LANDSCAPE USA, LLC</b> Company Name  Name of Parent Company (if Applicable)	<b>CODY MARTIN</b> Attendee's Name  <b>BRANCH MANAGER</b> Title	Mailing Address: <b>4134 Temple City Blvd</b> City: <b>Rosemead</b> State: <b>CA</b> Zip: <b>91770</b> Telephone Number: <b>(626) 377-4845</b> FAX: <b>(626) 376-9176</b> E-Mail Address: <b>CODY.MARTIN@LANDSCAPE.COM</b>
<b>Conejo Crest Landscape</b> Company Name  Name of Parent Company (if Applicable)	<b>Javier Velasquez</b> Attendee's Name  <b>Supervisor</b> Title	Mailing Address: <b>16435 Hart Street</b> City: <b>Van Nuys</b> State: <b>CA</b> Zip: <b>91406</b> Telephone Number: <b>(818) 988-9696</b> FAX: <b>(818) 988-4934</b> E-Mail Address: <b>galbanez@conejocrest.com</b>

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
<u>United Pacific Services</u> <small>Company Name</small> <hr/> <small>Name of Parent Company (if Applicable)</small>	<u>Ireo Ramirez</u> <small>Attendee's Name</small> <hr/> <small>Title</small>	<del>5529 Leeds St</del> Mailing Address: <u>eric@unitedpac.com</u> <u>5529 Leeds St</u> City: <u>South Gate</u> State: <u>CA</u> Zip: <u>91280</u> Telephone Number: <u>(562) 691-4600</u> FAX: <u>(562) 691-8839</u> E-Mail Address: <u>eric@united Pacific Services</u>
<u>AZTECA LANDSCAPE</u> <small>Company Name</small> <hr/> <small>Name of Parent Company (if Applicable)</small>	<u>RAUL FARIAS</u> <small>Attendee's Name</small> <hr/> <u>ACCOUNT MANAGER</u> <small>Title</small>	<u>1180 OLYMPIC DR SUITE 207</u> Mailing Address: <u>raul@aztecaglandscap.com</u> City: <u>CORONA</u> State: <u>CA</u> Zip: <u>92881</u> Telephone Number: <u>(909) 673-0889</u> FAX: <u>(909) 673-9192</u> E-Mail Address: <u>raul@aztecaglandscap.com</u>
<hr/> <small>Company Name</small> <hr/> <small>Name of Parent Company (if Applicable)</small>	<hr/> <small>Attendee's Name</small> <hr/> <small>Title</small>	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: ( ) _____ FAX: ( ) _____ E-Mail Address: _____
<hr/> <small>Company Name</small> <hr/> <small>Name of Parent Company (if Applicable)</small>	<hr/> <small>Attendee's Name</small> <hr/> <small>Title</small>	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: ( ) _____ FAX: ( ) _____ E-Mail Address: _____
<hr/> <small>Company Name</small> <hr/> <small>Name of Parent Company (if Applicable)</small>	<hr/> <small>Attendee's Name</small> <hr/> <small>Title</small>	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: ( ) _____ FAX: ( ) _____ E-Mail Address: _____

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<u>Mariposa Landscapes inc.</u> <small>Company Name</small>  _____ <small>Name of Parent Company (if Applicable)</small>	<u>Brandon Park</u> <small>Attendee's Name</small>  <u>Estimator</u> <small>Title</small>	Mailing Address: <u>6232 Santos Diaz st.</u> City: <u>Irwindale</u> State: <u>CA</u> Zip: <u>91724</u> Telephone Number: <u>(626) 210-9495</u> FAX: <u>(626) 960-8477</u> E-Mail Address: <u>brandon.park@mariposa-ca.com</u>
_____ <small>Company Name</small>  _____ <small>Name of Parent Company (if Applicable)</small>	_____ <small>Attendee's Name</small>  _____ <small>Title</small>	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: ( ) FAX: ( ) E-Mail Address: _____
_____ <small>Company Name</small>  _____ <small>Name of Parent Company (if Applicable)</small>	_____ <small>Attendee's Name</small>  _____ <small>Title</small>	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: ( ) FAX: ( ) E-Mail Address: _____
_____ <small>Company Name</small>  _____ <small>Name of Parent Company (if Applicable)</small>	_____ <small>Attendee's Name</small>  _____ <small>Title</small>	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: ( ) FAX: ( ) E-Mail Address: _____
_____ <small>Company Name</small>  _____ <small>Name of Parent Company (if Applicable)</small>	_____ <small>Attendee's Name</small>  _____ <small>Title</small>	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: ( ) FAX: ( ) E-Mail Address: _____