



Lodi Unified School District
Tokay HS Modular Classroom Project Incr. 2
Mandatory Informational Conference Sign-in Sheet
Tuesday February 19, 2019 @ 10:00 AM



All prospective bidders must SIGN-IN at the start of the Informational Conference

Please Leave Business Cards.

Company	DIEDE CONSTRUCTION INC	PC:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Name (Print)	BRETT DIEDE	Sub:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Address:	PO Box 1007			
City/State/Zip	WOODBIDGE CA 95258			
Phone:	209-569-8255	Fax:	209-368-0660	
E-Mail:	ESTIMATING@DIEDECONSTRUCTION.COM			
Signature (IN)				
License Type	A B			

Company	AMERICAN MODULAR SYSTEMS	PC:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Name (Print)	JUSTIN TORRES	Sub:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Address:	787 SPANGLERS			
City/State/Zip	MANTECA, CA 95336			
Phone:	(209) 993-4285 993-4285	Fax:	(209) 825-7018	
E-Mail:	justin.t@americanmodular.com			
Signature (IN)				
License Type				

Company	MEEHLEIS MODULAR BUILDINGS	PC:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Name (Print)	CARMEN Ocampo ; MARK MEEHLEIS	Sub:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Address:	1303 E. Lodi Ave			
City/State/Zip	Lodi, CA 95240			
Phone:	916-802-8220 209-334-4637	Fax:		
E-Mail:	CARMEN@MEEHLEIS.COM ; MARK@MEEHLEIS.COM			
Signature (IN)				
License Type	B			

Company	JL Construction / JL Modular	PC:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Name (Print)	Will Cunnell	Sub:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Address:	70 Stay Point Rd			
City/State/Zip	Santa Rosa CA 95401			
Phone:	707-527-5788	Fax:		
E-Mail:	willc@JLbuild.com			
Signature (IN)				
License Type	B			



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Company	LPA INC. (ARCHITECT)	PC: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Name (Print)	ANTHONY HARRIS	Sub: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Address:		
City/State/Zip		
Phone:		Fax:
E-Mail:	AHARRIS@LPAINC.COM	
Signature (IN)		
License Type		

Company	LUSD	PC: <input type="checkbox"/> Yes <input type="checkbox"/> No
Name (Print)	VICKIE BRUM	Sub: <input type="checkbox"/> Yes <input type="checkbox"/> No
Address:		
City/State/Zip		
Phone:	209 331-7223	Fax:
E-Mail:	Vbrum@aol.com	
Signature (IN)	VB	
License Type		

Company	LODI UNIFIED	PC: <input type="checkbox"/> Yes <input type="checkbox"/> No
Name (Print)	KATIE MADZIER	Sub: <input type="checkbox"/> Yes <input type="checkbox"/> No
Address:		
City/State/Zip		
Phone:		Fax:
E-Mail:	KMADZIER@LODIUSD.NET	
Signature (IN)		
License Type		

Company	LODI UNIFIED	PC: <input type="checkbox"/> Yes <input type="checkbox"/> No
Name (Print)	JF PATTY	Sub: <input type="checkbox"/> Yes <input type="checkbox"/> No
Address:		
City/State/Zip		
Phone:		Fax:
E-Mail:	JPATTY@LODIUSD.NET	
Signature (IN)		
License Type		



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Company	BERNARDS	PC: <input type="checkbox"/> Yes <input type="checkbox"/> No
Name (Print)	LONZO ERNEST	Sub: <input type="checkbox"/> Yes <input type="checkbox"/> No
Address:		
City/State/Zip		
Phone:	559.770-9389	Fax:
E-Mail:	lernest@bernards.com	
Signature (IN)	<i>LE</i>	
License Type		

Company		PC: <input type="checkbox"/> Yes <input type="checkbox"/> No
Name (Print)		Sub: <input type="checkbox"/> Yes <input type="checkbox"/> No
Address:		
City/State/Zip		
Phone:		Fax:
E-Mail:		
Signature (IN)		
License Type		

Company		PC: <input type="checkbox"/> Yes <input type="checkbox"/> No
Name (Print)		Sub: <input type="checkbox"/> Yes <input type="checkbox"/> No
Address:		
City/State/Zip		
Phone:		Fax:
E-Mail:		
Signature (IN)		
License Type		

Company		PC: <input type="checkbox"/> Yes <input type="checkbox"/> No
Name (Print)		Sub: <input type="checkbox"/> Yes <input type="checkbox"/> No
Address:		
City/State/Zip		
Phone:		Fax:
E-Mail:		
Signature (IN)		
License Type		