

**VENDOR ATTENDANCE LIST
PRE-BID**

BID # BC-06-12-12-66 DATE/TIME: Wednesday, may 23, 2012 at 10:00 AM

BID TITLE: BOA, Stairwell, Elevator and General Building Pressurization

PLEASE PRINT:

Company <u>Purchasing Leon County</u>	Phone# <u>606-1600</u>
Representative <u>DON TOBIN</u>	Fax # <u>606-1601</u>
Company <u>Commercial Repair & Renovations LLC</u>	Phone# <u>888-562-1007</u>
Representative <u>Mickey Neese</u>	Fax # <u>850-562-2797</u>
Company <u>P.S.B.I.</u>	Phone# <u>850-576-7189</u>
Representative <u>Justin Derrington</u>	Fax # <u>850-575-3749</u>
Company <u>Vause Mechanical</u>	Phone# <u>850 575-4563</u>
Representative <u>KEITH VAUSE</u>	Fax # <u>850 575-9223</u>
Company <u>Facilities Management</u>	Phone# <u>606-5000</u>
Representative <u>Albert Sessions</u>	Fax # <u>606-5001</u>
Company <u>CSI Contracting</u>	Phone# <u>875.1471</u>
Representative <u>Norman McMillan</u>	Fax # <u>627.9673</u>
Company <u>BARNETT FRONCZAK KARLONE ARCH.</u>	Phone# <u>224 6301</u>
Representative <u>KATHRYN STIVERS</u>	Fax # <u>567-6978</u>
Company <u>Air Mechanical Service</u>	Phone# <u>329-7366</u>
Representative <u>Jason Johnson</u>	Fax # <u>329-7615</u>
Company <u>Facilities Management</u>	Phone# <u>606-5012</u>
Representative <u>Shirley O Cason</u>	Fax # _____

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Company <u>Leon County</u>	Phone# _____
Representative <u>Leon County Graham Stewart</u>	Fax # _____
Company <u>Leon County</u>	Phone# <u>606-5381</u>
Representative <u>Kim Dressel</u>	Fax # _____
Company <u>Simplex Grinnell</u>	Phone# <u>408-3084</u>
Representative <u>JOHN NIXON</u>	Fax # <u>575-2776</u>
Company <u>Benson's Heating & A/C, Inc</u>	Phone# <u>562.3132</u>
Representative <u>BO MIXER</u>	Fax # <u>562.6546</u>
Company <u>Kelly Brothers</u>	Phone# <u>878-1148</u>
Representative <u>Tad Lee</u>	Fax # <u>878-2424</u>
Company <u>Oliver Renovation</u>	Phone# ⁸⁵⁰ <u>386 6383</u>
Representative <u>Chris Buchholz</u>	Fax # ⁸⁵⁰ <u>325 1186</u>
Company _____	Phone# _____
Representative _____	Fax # _____
Company _____	Phone# _____
Representative _____	Fax # _____
Company _____	Phone# _____
Representative _____	Fax # _____