

**Pre-Bid / Site Visit
 Invitation to Bid 180401 – Remodel – Canal Street Operations Building
 May 29, 2018 / 9:00 AM**

Owner Representatives		
Agency	Name / Title	Initials
City of Leesburg	Mike Thornton, Purchasing Manager	MT
City of Leesburg	Lisa Wolfkill, Senior Buyer	LW
City of Leesburg	Amy Fleck, Deputy Director Facility Services	AF
City of Leesburg	Jim Grindrod, Maintenance Manager Facility Services	JG
City of Leesburg	Jerrill Robison, Chief Plant Operator	JR
City of Leesburg		

VENDOR REPRESENTATIVES

Business / Company Name: Broadway Contracting	Representative Name: Bryan Cardona	Type of Representative <input checked="" type="checkbox"/> Prime/General Contractor <input type="checkbox"/> Sub-Contractor <input type="checkbox"/> Supplier / Manufacturer
e-mail address: Service@BroadwayContracting.com	Phone No.: 407-924-7228	

Business / Company Name: SACASKY CONST	Representative Name: RAY YOUNG	Type of Representative <input checked="" type="checkbox"/> Prime/General Contractor <input type="checkbox"/> Sub-Contractor <input type="checkbox"/> Supplier / Manufacturer
e-mail address: RYOUNG@SACASKYCONSTRUCTION.COM	Phone No.: 407-240-6775	

Business / Company Name: M.C&M Construction Corp.	Representative Name: Clobert Munk	Type of Representative <input type="checkbox"/> Prime/General Contractor <input type="checkbox"/> Sub-Contractor <input type="checkbox"/> Supplier / Manufacturer
e-mail address: MEWDCCASSC@GMAIL.COM	Phone No.: 754 948 1155	

Business / Company Name: Hassana bc	Representative Name: Jose Ferrer	Type of Representative <input type="checkbox"/> Prime/General Contractor <input type="checkbox"/> Sub-Contractor <input type="checkbox"/> Supplier / Manufacturer
e-mail address: je jose@Hassanabc.com	Phone No.: (407) 280-0796	

Business / Company Name:	Representative Name:	Type of Representative <input type="checkbox"/> Prime/General Contractor <input type="checkbox"/> Sub-Contractor <input type="checkbox"/> Supplier / Manufacturer
e-mail address:	Phone No.:	

Business / Company Name:	Representative Name:	Type of Representative <input type="checkbox"/> Prime/General Contractor <input type="checkbox"/> Sub-Contractor <input type="checkbox"/> Supplier / Manufacturer
e-mail address:	Phone No.:	

Business / Company Name:	Representative Name:	Type of Representative <input type="checkbox"/> Prime/General Contractor <input type="checkbox"/> Sub-Contractor <input type="checkbox"/> Supplier / Manufacturer
e-mail address:	Phone No.:	