

PROJECT NAME: Aster Street at S 58th and Meadow Park ADA Ramps PROJECT # P21172

DATE/TIME: Monday, November 21st, 10:00 a.m.



**Pre-Bid Meeting Sign-In Sheet - NON-MANDATORY**

1	Name: Mariah Kimpton	Email:
	Company: City of Springfield	Cell Phone:
	Address: 225 Fifth Street	Office Phone:
	City: Springfield State: OR Zip: 97477	Fax:
2	Name: Jocelyn Grassest	Email:
	Company: City of Springfield	Cell Phone:
	Address: 225 Fifth Street	Office Phone:
	City: Springfield State: OR Zip: 97477	Fax:
3	Name: Amanda Clinton	Email:
	Company: City of Springfield	Cell Phone:
	Address: 225 Fifth Street	Office Phone:
	City: Springfield State: OR Zip: 97477	Fax:
4	Name: Eric Guevara	Email:
	Company: Brown Contracting	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
5	Name: Trip Coggin	Email:
	Company: City of Springfield	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:

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6	Name: Jeff Paschall	Email:
	Company: City of Springfield	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
7	Name: Terry Green	Email:
	Company: City of Springfield	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
8	Name: Matt Parker	Email:
	Company: City of Springfield	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
9	Name: Nick Chaney	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
10	Name: Naomi	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
11	Name	Email:
	Company	Cell Phone:

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	Address:	Office Phone:
	City: State: Zip:	Fax:
12	Name	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
13	Name	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
14	Name	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
15	Name	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
16	Name	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:

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17	Name	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
18	Name	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
19	Name	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
20	Name	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
21	Name	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
22	Name	Email:
	Company	Cell Phone:

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	City: State: Zip:	Fax:
23	Name	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
24	Name	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
25	Name	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
26	Name	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
27	Name	Email:
	Company	Cell Phone:
	Address:	Office Phone:
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	City: State: Zip:	Fax:
29	Name	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax:
30	Name	Email:
	Company	Cell Phone:
	Address:	Office Phone:
	City: State: Zip:	Fax: