

## SIGN IN SHEET

Complete the following and turn into the Contracting Officer

1. Company Name: SF AND ASSOCIATES

Company Representative: BILL PAYNE

Phone # 709-752-9213 Email: BILLP@SFASSOCIATES.NET

Additional Representative: \_\_\_\_\_

Phone # \_\_\_\_\_ Email: \_\_\_\_\_

Additional Representative: \_\_\_\_\_

Phone # \_\_\_\_\_ Email: \_\_\_\_\_

Please check one of the following:

General Contractor

Sub-Contractor

Please check the project you are here for:

Provide/Install Three Wayfinding Kiosks

Install Cat 6 Cable

CLC Wanderguard Modifications

Replace MRI Magnet Chiller

Building 12 Bed Storage Areas

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**Complete the following and turn into the Contracting Officer**

**1. Company Name:** Salinas & Farias and Associates

**Company Representative:** \_\_\_\_\_

**Phone #** 916-743-8612      **Email:** Paulcsm@sbcglobal.net

**Additional Representative:** \_\_\_\_\_

**Phone #** \_\_\_\_\_      **Email:** \_\_\_\_\_

**Additional Representative:** \_\_\_\_\_

**Phone #** \_\_\_\_\_      **Email:** \_\_\_\_\_

**Please check one of the following:**

**General Contractor**

**Sub-Contractor**

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**Building 12 Bed Storage Areas**

## SIGN IN SHEET

**Complete the following and turn into the Contracting Officer**

**1. Company Name:** GLEN/MAR CONSTRUCTION

**Company Representative:** JOHN WALLACE

**Phone #** 817.876.4080 **Email:** JOHNW@GLENMARCONSTRUCTION.COM

**Additional Representative:** RYAN HUBEL

**Phone #** 503.650.1720 **Email:** RYAN@GLENMARCONSTRUCTION.COM

**Additional Representative:** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Email:** \_\_\_\_\_

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**Complete the following and turn into the Contracting Officer**

**1. Company Name:** PaTrioT Construction

**Company Representative:** Cam Bennett

**Phone #** 775-800-3583 **Email:** estimating@patriotbuilds.com

**Additional Representative:** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Additional Representative:** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Email:** \_\_\_\_\_

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**Complete the following and turn into the Contracting Officer**

**1. Company Name:** Nelson Electric

**Company Representative:** Scott Emerich

**Phone #** 358-0643 **Email:** scott@nelsonelectric.net

**Additional Representative:** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Additional Representative:** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Email:** \_\_\_\_\_

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**Complete the following and turn into the Contracting Officer**

**1. Company Name:** J.W. McClernahan

**Company Representative:** Marc Kessner

**Phone #** 775-671-5501 **Email:** MKessner@J.W.McClernahanCo.com

**Additional Representative:** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Additional Representative:** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Email:** \_\_\_\_\_

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**Complete the following and turn into the Contracting Officer**

**1. Company Name:** ACTS

**Company Representative:** Phillip Nitton

**Phone #** 775-359-7308 **Email:** Service@actscorp.com

**Additional Representative:** Amanda Martinez

**Phone #** 775-359-7308 **Email:** Service@actscorp.com

**Additional Representative:** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Please check one of the following:**

\_\_\_\_\_ **General Contractor**

X **Sub-Contractor**

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X **Install Cat 6 Cable**

\_\_\_\_\_ **CLC Wanderguard Modifications**

\_\_\_\_\_ **Replace MRI Magnet Chiller**

\_\_\_\_\_ **Building 12 Bed Storage Areas**

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**Complete the following and turn into the Contracting Officer**

**1. Company Name:** HARDING MECHANICAL

**Company Representative:** WARREN

**Phone #** 775-530-8558 **Email:** warrenharding@charter.net

**Additional Representative:** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Additional Representative:** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Email:** \_\_\_\_\_

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X **Sub-Contractor**

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**Complete the following and turn into the Contracting Officer**

**1. Company Name:** Cabling Solutions

**Company Representative:** Nick Mongillo

**Phone #** 775-745-5346 **Email:** Nick@CSIREno.com

**Additional Representative:** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Additional Representative:** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Email:** \_\_\_\_\_

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