

Sign-In Sheet
 Non-Mandatory Pre-Submittal Meeting
 DESALINATION WELLFIELD COLLECTION PIPELINE DESIGN SERVICES
 Solicitation No.: PS-00073
 January 29, 2019 at 10:00 am

Print Name	Company	Address	Phone	E-mail	Type
1 KEVIN MORRISON	SAWS	2800 U.S. Hwy 281 N	210 233-3667	KEVIN.MORRISON@SAWS.ORG	<input type="checkbox"/> Consultant <input type="checkbox"/> Sub-Consultant <input type="checkbox"/> Supplier <input checked="" type="checkbox"/> SAWS <input type="checkbox"/> Other _____
2 Jonathan Vorheis	Jacobs	911 Central Pkwy S.A. TX 78222	210-241-9737	Jonathan.Vorheis@jacobs.com	<input checked="" type="checkbox"/> Consultant <input type="checkbox"/> Sub-Consultant <input type="checkbox"/> Supplier <input type="checkbox"/> SAWS <input type="checkbox"/> Other _____
3 Mike Myers	SAWS		210-233-3570	Michael.Myers@saws.org	<input type="checkbox"/> Consultant <input type="checkbox"/> Sub-Consultant <input type="checkbox"/> Supplier <input checked="" type="checkbox"/> SAWS <input type="checkbox"/> Other _____
4 Duane Bryant	SAWS		210-233-3701	duane.bryant@saws.org	<input type="checkbox"/> Consultant <input type="checkbox"/> Sub-Consultant <input type="checkbox"/> Supplier <input checked="" type="checkbox"/> SAWS <input type="checkbox"/> Other _____
5 Shawn Dorn	SAWS	2800 US Hwy 281 SA TX	210 233 3560	shawn.dorn@saws.org	<input type="checkbox"/> Consultant <input type="checkbox"/> Sub-Consultant <input type="checkbox"/> Supplier <input checked="" type="checkbox"/> SAWS <input type="checkbox"/> Other _____
6 Rob Eschbacher	SAWS	#2 OAKS	233-3514	Robert.Eschbacher@SAWS.ORG	<input type="checkbox"/> Consultant <input type="checkbox"/> Sub-Consultant <input type="checkbox"/> Supplier <input type="checkbox"/> SAWS <input type="checkbox"/> Other _____
7 Charles Schoenings	Arcadis	1777 MILDRED CH SUIT 625	210-544-8767	charles.schoenings@arcadis.com	<input checked="" type="checkbox"/> Consultant <input type="checkbox"/> Sub-Consultant <input type="checkbox"/> Supplier <input type="checkbox"/> SAWS <input type="checkbox"/> Other _____
8					<input type="checkbox"/> Consultant <input type="checkbox"/> Sub-Consultant <input type="checkbox"/> Supplier <input type="checkbox"/> SAWS <input type="checkbox"/> Other _____
9					<input type="checkbox"/> Consultant <input type="checkbox"/> Sub-Consultant <input type="checkbox"/> Supplier <input type="checkbox"/> SAWS <input type="checkbox"/> Other _____
10					<input type="checkbox"/> Consultant <input type="checkbox"/> Sub-Consultant <input type="checkbox"/> Supplier <input type="checkbox"/> SAWS <input type="checkbox"/> Other _____

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