BODY ARMOR, TACTICAL, TECHNICAL AND PROTECTIVE GEAR SPECIFICATION: 411553

PRE-SUBMITTAL ATTENDEE REGISTER

CONFERENCE DATE: FEBRUARY 13, 2019 @ 9:30 a.m.

LOCATION: CITY HALL – ROOM 103

121 N. LASALLE STREET CHICAGO, ILLINOIS 60602

USER DEPT: CHICAGO POLICE DEPARTMENT

SR. PROCUREMENT SPECIALIST: STACY STEWART

PRE-BID/SUBMITTAL ATTENDEE REGISTER

Body Armor, Tactical, Technical and Protective Gear	
Department:	Chicago Police Department
Specification Number:	411553
Location	February 13 @ 09:30 a.m., @ City Hall 121 N. LaSalle St. Bid and Bond Room 103, Chicago, IL 60602
Fax: E-Mail: Please print clearly	
	_
Attendee Name: CHr.S OHEnnon Company Name: CAY OHEnnon Co	Joel W. Brown Contract Administrator Finance Division/Procurement
Company Address: 1600 75TH ST DONNES GOVE IL 60516	Chicago Police Department 3510 South Michigan Avenue Chicago, Illinois 60653
Telephone: 630 - 629 - 2677	pax: 0592 office: (312) 745-5640 fax: (312) 745-6841
E-Mail: CHRIS CONERARD, COM Please print clearly OHERRON. CO.	email: joel.brown@chicagopolice.org
Attendee Name: Wendy Gulley	

Company Name: POINT

2102 SW 2 ra

Telephone: 313



Fax: E-Mail: Wmartin@ spearmer. com Please print clearly Attendee Name: _ろっち Company Name: Pro-Tech Company Address: 13/3 W. {Business Card} Telephone: Fax: COM E-Mail: Please print clearly Attendee Name: Company Name: ___ Company Address: Blus {Business Card} Telephone: Fax: E-Mail: Please print clearly

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Attendee Name: F.O. TREACHER HOWARD Company Name: CHICAGO POLICE DEPARTMENT	
Company Address: 1300 LV. Jacusov BLVD	{Business Card}
Telephone: 312-746-8310 EXT 247 Fax:	
E-Mail: TREACHER. HOWARD & Ch. LASSON line ing Please print clearly	
Attendee Name: Po bolita Dewell Company Name: Chicago Police Dept	
Company Address: 1300 10 Jackson War Chica (y) 71 60607	{Business Card}
Telephone: 317 746-8310 Ext270 Fax:	
E-Mail: Lot to Newell @Chicago Police Please print clearly	8
Attendee Name: ALANUE A. HULL Company Name: CHICHEN POUCE DEPT	
Company Address: 35 10 S: MICHIONNI AND	{Business Card}
Telephone: 3/2-1/45-36-44	
E-Mail: //ALANUE HULL 6 CHECK COPOLICE OF COPOLICE	
Attendee Name:	
Company Address:	
	{Business Card}
Telephone:Fax:	
E-Mail:	
Attendee Name:	