

**County of Napa Public Works Department**  
Project: East Central Paving Project, Phase Three, RDS 21-25C  
Contact: [liang.su@countyofnapa.org](mailto:liang.su@countyofnapa.org)

Mandatory Pre-Bid Meeting Date: June 6, 2023 at 9:30 AM

Bid Opening Date: June 15, 2023 at 2:30 PM

**MANDATORY PRE-BID MEETING CONTRACTOR SIGN-OUT SHEET**

COMPANY: <u>Goodfellow Bros.</u>	COMPANY: <u>Argonaut Constructors</u>
NAME: <u>Joe Broder</u>	NAME: <u>Christer Berglund</u>
STREET/P.O. BOX: <u>50 Contractors Rd.</u>	STREET/P.O. BOX: <u>Sutter Place</u>
CITY: <u>Livermore</u>	CITY: <u>Santa Rosa</u>
STATE: <u>CA</u> ZIP: <u>94551</u>	STATE: <u>CA</u> ZIP: _____
PHONE # <u>925-245-2119</u>	PHONE # <u>707 542-4862</u>
FAX # _____	FAX # _____
EMAIL: <u>RyanCar@Goodfellowbros.com</u>	EMAIL: <u>dave@argonautconstructors.com</u>
COMPANY: <u>Martin Brother Construct</u>	COMPANY: <u>GHILOTTI Bros</u>
NAME: <u>Codfrey Okpame</u>	NAME: <u>RICH WILKERSON</u>
STREET/P.O. BOX: <u>8801 Folsom Blvd</u>	STREET/P.O. BOX: <u>525 Jacoby St.</u>
CITY: <u>Sacramento</u>	CITY: <u>San Rafael</u>
STATE: <u>CA</u> ZIP: <u>95826</u>	STATE: <u>CA</u> ZIP: <u>94901</u>
PHONE # <u>916 381-0911</u>	PHONE # <u>925-250-2977</u>
FAX # _____	FAX # <u>415-453-7860</u>
EMAIL: <u>estimating@martinbrothers.net</u>	EMAIL: <u>Richw@gb1914.com</u>

**Attending and signing out for the site visit is mandatory. Agents for any contractor must sign in and state the name of the contractor they represent on the sign in sheet. Any contractor failing to have an agent sign in and list the contractor's name on the sign in sheet will be disqualified from the bidding process.**

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COMPANY: <u>TEAM GILLOTTI</u>	COMPANY: _____
NAME: <u>GABE DURJAN</u>	NAME: _____
STREET/P.O. BOX: <u>2531 Petaluma south</u>	STREET/P.O. BOX: _____
CITY: <u>Petaluma</u>	CITY: _____
STATE: <u>CA</u> ZIP: <u>94952</u>	STATE: <u>CA</u> ZIP: _____
PHONE # <u>707 763 8700</u>	PHONE # _____
FAX # <u>GABE D @ TEAM GILLOTTI .COM</u>	FAX # _____
EMAIL: <u>GABE D @ TEAM GILLOTTI .COM</u>	EMAIL: _____
COMPANY: _____	COMPANY: _____
NAME: _____	NAME: _____
STREET/P.O. BOX: _____	STREET/P.O. BOX: _____
CITY: _____	CITY: _____
STATE: <u>CA</u> ZIP: _____	STATE: <u>CA</u> ZIP: _____
PHONE # _____	PHONE # _____
FAX # _____	FAX # _____
EMAIL: _____	EMAIL: _____

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