

SCHEDULE "A" (Continued)
SUBCONTRACTORS AND SUPPLIERS

SUBCONTRACTORS OR SUPPLIERS NAME, ADDRESS, TELEPHONE NO.	SUB	SUPPLIER	CONTRACTOR LICENSE NO.	DESCRIPTION OF WORK OR SUPPLIES TO BE PROVIDED (*if supplying or subcontracting for add/deduct alternate items, please note herein)	MBE	WBE	OBE	DOLLAR VALUE OF SUBCONTRACT OR SUPPLIES(*note if add/deduct item)
Cal. Commercial Pool Glendora 909-394-1280	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Swimming Pool System Pool Plumbing & Electrical Splash Pad & related			X	Base: \$ 680,000 Add's: \$ _____ Ded's: \$ _____
JUNO Alhambra 626-282-5860	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Electrical			X	Base: \$ 52,000 Add's: \$ _____ Ded's: \$ _____
	<input type="checkbox"/>	<input type="checkbox"/>						Base: \$ _____ Add's: \$ _____ Ded's: \$ _____
	<input type="checkbox"/>	<input type="checkbox"/>						Base: \$ _____ Add's: \$ _____ Ded's: \$ _____
	<input type="checkbox"/>	<input type="checkbox"/>						Base: \$ _____ Add's: \$ _____ Ded's: \$ _____
	<input type="checkbox"/>	<input type="checkbox"/>						Base: \$ _____ Add's: \$ _____ Ded's: \$ _____
	<input type="checkbox"/>	<input type="checkbox"/>						Base: \$ _____ Add's: \$ _____ Ded's: \$ _____
	<input type="checkbox"/>	<input type="checkbox"/>						Base: \$ _____ Add's: \$ _____ Ded's: \$ _____
	<input type="checkbox"/>	<input type="checkbox"/>						Base: \$ _____ Add's: \$ _____ Ded's: \$ _____
	<input type="checkbox"/>	<input type="checkbox"/>						Base: \$ _____ Add's: \$ _____ Ded's: \$ _____