

**Pre-Proposal Conference Sign-in Sheet
K21-0074-29 JAVA Engineer Analyst**

Name: <u>Swapnil Lohakare</u> Company: <u>Kaitech Solutions LLC</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input checked="" type="radio"/> Yes <input type="radio"/> No Small Business: <input type="radio"/> Yes <input type="radio"/> No Veteran Owned: <input type="radio"/> Yes <input type="radio"/> No Veteran Owned Small Business: <input type="radio"/> Yes <input type="radio"/> No
Name: <u>Alvina Babr</u> Company: <u>FAAZ Consulting, LLC</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input type="radio"/> Yes <input type="radio"/> No Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No Veteran Owned: <input type="radio"/> Yes <input type="radio"/> No Veteran Owned Small Business: <input type="radio"/> Yes <input type="radio"/> No
Name: <u>Karen Laisney</u> Company: <u>K3 Solutions, LLC</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input type="radio"/> Yes <input type="radio"/> No Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No Veteran Owned: <input type="radio"/> Yes <input type="radio"/> No Veteran Owned Small Business: <input type="radio"/> Yes <input type="radio"/> No
Name: <u>Michael Charles, Vijji Sundaram</u> Company: <u>Solutions MET, LLC</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input type="radio"/> Yes <input type="radio"/> No Small Business: <input type="radio"/> Yes <input type="radio"/> No Veteran Owned: <input type="radio"/> Yes <input type="radio"/> No Veteran Owned Small Business: <input type="radio"/> Yes <input type="radio"/> No

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Name: <u>Sarah Ali, Waseem Jan</u> Company: <u>IQuasar, LLC</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: Yes No Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No Veteran Owned: Yes No Veteran Owned Small Business: Yes No
Name: <u>Lucy Garcia</u> Company: <u>Beacon Systems Inc</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input checked="" type="radio"/> Yes <input type="radio"/> No Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No Veteran Owned: Yes No Veteran Owned Small Business: Yes No
Name: <u>Laci Beall, Mike Deamer</u> Company: <u>Synergy Systems & Services Inc</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input checked="" type="radio"/> Yes <input type="radio"/> No Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No Veteran Owned: Yes No Veteran Owned Small Business: Yes No
Name: <u>Mark Anzmann</u> Company: <u>Syscom, Inc</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: Yes No Small Business: Yes No Veteran Owned: Yes No Veteran Owned Small Business: Yes No

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Name: <u>Elizabeth Jackson + Theresa Boyle</u> Company: <u>AP Ventures, LLC</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input checked="" type="radio"/> Yes <input type="radio"/> No Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No Veteran Owned: <input type="radio"/> Yes <input type="radio"/> No Veteran Owned Small Business: <input type="radio"/> Yes <input type="radio"/> No
Name: <u>Mike Korba</u> Company: <u>IT Tech Direct, LLC</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input type="radio"/> Yes <input type="radio"/> No Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No Veteran Owned: <input type="radio"/> Yes <input type="radio"/> No Veteran Owned Small Business: <input type="radio"/> Yes <input type="radio"/> No
Name: <u>Eric Weissert, Marcellas Howard</u> Company: <u>Davis Unlimited Info Technologies</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input type="radio"/> Yes <input type="radio"/> No Small Business: <input type="radio"/> Yes <input type="radio"/> No Veteran Owned: <input type="radio"/> Yes <input type="radio"/> No Veteran Owned Small Business: <input type="radio"/> Yes <input type="radio"/> No
Name: <u>Aparna V. Iyer, R.S. Vankatachalam</u> Company: <u>Mansai Corporation</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input type="radio"/> Yes <input type="radio"/> No Small Business: <input type="radio"/> Yes <input type="radio"/> No Veteran Owned: <input type="radio"/> Yes <input type="radio"/> No Veteran Owned Small Business: <input type="radio"/> Yes <input type="radio"/> No

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Name: <u>Shivani Kaushal</u> Company: <u>Synapse Business Systems</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: Yes No Small Business: Yes No Veteran Owned: Yes No Veteran Owned Small Business: Yes No
Name: <u>Katie Rahn</u> Company: <u>War Tech Group</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: Yes No Small Business: Yes No Veteran Owned: Yes No Veteran Owned Small Business: <u>Yes</u> No
Name: <u>Jennifer Witt Kepp</u> Company: <u>3Di, Inc.</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <u>Yes</u> No Small Business: <u>Yes</u> No Veteran Owned: Yes No Veteran Owned Small Business: Yes No
Name: <u>Robert Edwards, Frederic de Vault</u> Company: <u>Prometheus Computing</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <u>Yes</u> No Small Business: <u>Yes</u> No Veteran Owned: Yes No Veteran Owned Small Business: Yes No

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Name: <u>Amrita Gautam, Rosy</u> Company: <u>22nd Century Technologies, Inc</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: Yes <input checked="" type="radio"/> No Small Business: Yes <input checked="" type="radio"/> No Veteran Owned: Yes <input checked="" type="radio"/> No Veteran Owned Small Business: Yes <input checked="" type="radio"/> No
Name: <u>Vignesh Jagadeesan</u> Company: <u>Abirami Radhakrishnan</u> Address: _____ City: <u>Intellectyx, Inc</u> State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: Yes <input checked="" type="radio"/> No Small Business: Yes <input checked="" type="radio"/> No Veteran Owned: Yes <input checked="" type="radio"/> No Veteran Owned Small Business: Yes <input checked="" type="radio"/> No
Name: <u>Sudhir Kota, David Maradona</u> Company: <u>IT Trailblazers, LLC</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input checked="" type="radio"/> Yes No Small Business: Yes <input checked="" type="radio"/> No Veteran Owned: Yes <input checked="" type="radio"/> No Veteran Owned Small Business: Yes <input checked="" type="radio"/> No
Name: <u>Kristen Sykes</u> Company: <u>Joint Enterprise Technologies, LLC</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: Yes <input checked="" type="radio"/> No Small Business: <input checked="" type="radio"/> Yes No Veteran Owned: <input checked="" type="radio"/> Yes No Veteran Owned Small Business: <input checked="" type="radio"/> Yes No

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Name: <u>Chris Dobson & Mahi Kampani</u> Company: <u>Mindseeker, Inc</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: Yes No Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No Veteran Owned: Yes No Veteran Owned Small Business: Yes No
Name: <u>Nick Vass</u> Company: <u>J29 Inc</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input checked="" type="radio"/> Yes <input type="radio"/> No Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No Veteran Owned: Yes No Veteran Owned Small Business: Yes No
Name: <u>Carolia Seldes, James Black, Carolina Villagas</u> Company: <u>IT Nova, LLC</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input checked="" type="radio"/> Yes <input type="radio"/> No Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No Veteran Owned: Yes No Veteran Owned Small Business: Yes No
Name: <u>Pallavi Ganti, Ashley Stefan, Umesh Pokhrel</u> Company: <u>Red B Services</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input checked="" type="radio"/> Yes <input type="radio"/> No Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No Veteran Owned: Yes No Veteran Owned Small Business: Yes No

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<p>Name: <u>Jeff Lyne and Daniel Bowers II</u></p> <p>Company: <u>Async Nu Microsystems</u></p> <p>Address: _____</p> <p>City: _____</p> <p>State, Zip: _____</p> <p>Office: _____ Cell: _____</p> <p>E-mail: _____</p>	<p>Certified MBE: <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Veteran Owned: <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Veteran Owned Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>Name: <u>Debbie Murray & Anurodha S.</u></p> <p>Company: <u>Edify Technologies, Inc</u></p> <p>Address: _____</p> <p>City: _____</p> <p>State, Zip: _____</p> <p>Office: _____ Cell: _____</p> <p>E-mail: _____</p>	<p>Certified MBE: <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Veteran Owned: <input type="radio"/> Yes <input type="radio"/> No</p> <p>Veteran Owned Small Business: <input type="radio"/> Yes <input type="radio"/> No</p>
<p>Name: <u>Crystal Cooper & Smiley Harrison</u></p> <p>Company: <u>Infojini, Inc</u></p> <p>Address: _____</p> <p>City: _____</p> <p>State, Zip: _____</p> <p>Office: _____ Cell: _____</p> <p>E-mail: _____</p>	<p>Certified MBE: <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Small Business: <input type="radio"/> Yes <input type="radio"/> No</p> <p>Veteran Owned: <input type="radio"/> Yes <input type="radio"/> No</p> <p>Veteran Owned Small Business: <input type="radio"/> Yes <input type="radio"/> No</p>
<p>Name: <u>Sanjeev Samant Viju Vibudhan</u></p> <p>Company: <u>V Group Inc</u></p> <p>Address: _____</p> <p>City: _____</p> <p>State, Zip: _____</p> <p>Office: _____ Cell: _____</p> <p>E-mail: _____</p>	<p>Certified MBE: <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Small Business: <input type="radio"/> Yes <input type="radio"/> No</p> <p>Veteran Owned: <input type="radio"/> Yes <input type="radio"/> No</p> <p>Veteran Owned Small Business: <input type="radio"/> Yes <input type="radio"/> No</p>

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Name: <u>Mohsin Shaikh</u> Company: <u>Cambay Consulting, LLC</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input checked="" type="radio"/> Yes <input type="radio"/> No Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No Veteran Owned: <input type="radio"/> Yes <input type="radio"/> No Veteran Owned Small Business: <input type="radio"/> Yes <input type="radio"/> No
Name: <u>George Kinchen</u> Company: <u>Waterleaf International</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input type="radio"/> Yes <input type="radio"/> No Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No Veteran Owned: <input type="radio"/> Yes <input type="radio"/> No Veteran Owned Small Business: <input type="radio"/> Yes <input type="radio"/> No
Name: <u>Ambar School & Neil Corp</u> Company: <u>COM Software, LLC</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input type="radio"/> Yes <input type="radio"/> No Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No Veteran Owned: <input type="radio"/> Yes <input type="radio"/> No Veteran Owned Small Business: <input type="radio"/> Yes <input type="radio"/> No
Name: <u>George Hardy</u> Company: <u>DK Consulting, LLC</u> Address: _____ City: _____ State, Zip: _____ Office: _____ Cell: _____ E-mail: _____	Certified MBE: <input checked="" type="radio"/> Yes <input type="radio"/> No Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No Veteran Owned: <input type="radio"/> Yes <input type="radio"/> No Veteran Owned Small Business: <input type="radio"/> Yes <input type="radio"/> No

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<p>Name: <u>Bernard Ellis, Jr.</u></p> <p>Company: <u>Evo Technologies LLC</u></p> <p>Address: _____</p> <p>City: _____</p> <p>State, Zip: _____</p> <p>Office: _____ Cell: _____</p> <p>E-mail: _____</p>	<p>Certified MBE: <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Small Business: <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Veteran Owned: Yes <input checked="" type="radio"/> No</p> <p>Veteran Owned Small Business: Yes <input checked="" type="radio"/> No</p>
<p>Name: <u>Jerish JS, Srikanth. K</u></p> <p>Company: <u>Prelude Systems, Inc</u></p> <p>Address: _____</p> <p>City: _____</p> <p>State, Zip: _____</p> <p>Office: _____ Cell: _____</p> <p>E-mail: _____</p>	<p>Certified MBE: <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Small Business: Yes <input type="radio"/> No</p> <p>Veteran Owned: <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Veteran Owned Small Business: Yes <input type="radio"/> No</p>
<p>Name: _____</p> <p>Company: _____</p> <p>Address: _____</p> <p>City: _____</p> <p>State, Zip: _____</p> <p>Office: _____ Cell: _____</p> <p>E-mail: _____</p>	<p>Certified MBE: Yes <input type="radio"/> No <input type="radio"/></p> <p>Small Business: Yes <input type="radio"/> No <input type="radio"/></p> <p>Veteran Owned: Yes <input type="radio"/> No <input type="radio"/></p> <p>Veteran Owned Small Business: Yes <input type="radio"/> No <input type="radio"/></p>
<p>Name: _____</p> <p>Company: _____</p> <p>Address: _____</p> <p>City: _____</p> <p>State, Zip: _____</p> <p>Office: _____ Cell: _____</p> <p>E-mail: _____</p>	<p>Certified MBE: Yes <input type="radio"/> No <input type="radio"/></p> <p>Small Business: Yes <input type="radio"/> No <input type="radio"/></p> <p>Veteran Owned: Yes <input type="radio"/> No <input type="radio"/></p> <p>Veteran Owned Small Business: Yes <input type="radio"/> No <input type="radio"/></p>