

**MANDATORY Pre-proposal Meeting**

**FORENSIC CRIME LAB OPERATION**

Spec #16-05/15

March 30, 2015 11:00 AM

**NOTICE:** Sending information about this bid by email or facsimile is an accommodation and the County of Bucks is not liable for any errors in transmission of the documents. Obtaining all bid documents including Addendums is the responsibility of the Bidder.

1. Barry Logan **YOU MUST PRINT CLEARLY!**

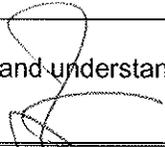
NMS Labs Company Name Phone: 215 366 1317

3701 Welsh Rd, Willow Grove Street Address Unit /Suite # Fax: \_\_\_\_\_

PA State 19090 Zip Email: barry.logan@nmslabs.com

City State Zip

I have read and understand the the Notice above:

Signature:  Printed Name and Title Barry Logan, UP Forensic Scientist

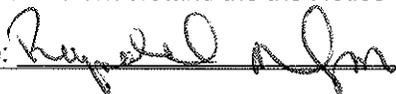
2. REYNOLD DYSON **YOU MUST PRINT CLEARLY!**

NMS LABS Company Name Phone: 215-366-1240

3701 WELSH ROAD Street Address Unit /Suite # Fax: 215-657-2972

WILLOW GROVE PA 19090 City State Zip Email: REYNOLD.DYSON@NMSLABS.COM

I have read and understand the the Notice above:

Signature:  Printed Name and Title REYNOLD DYSON - SR. STRATEGIC BUS. MANAGER

3. Mike Casiola **YOU MUST PRINT CLEARLY!**

Bode Technology Company Name Phone: 703.646.9876

10430 Furnace Road Street Address Unit /Suite # Fax: 703.646.9741

Reston VA 22079 City State Zip Email: mike.casiola@bodetech.com

I have read and understand the the Notice above: contracts@bodetech.com

Signature:  Printed Name and Title Mike Casiola General Manager

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4. CHRISTIAN G. WESTRING **YOU MUST PRINT CLEARLY!**

NMS Labs Phone: 215-366-1380  
Company Name

2300 Bradford Ave Fax: 215-366-1101  
Street Address Unit /Suite # Email:

Willow Grove PA 19090 Email: christian.westring@NMSlabs.com  
City State Zip

I have read and understand the the Notice above:

Signature: [Signature] Printed Name and Title Director of Criminal Lab

5. **YOU MUST PRINT CLEARLY!**

Company Name Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Street Address Unit /Suite # Email: \_\_\_\_\_

City State Zip

I have read and understand the the Notice above: 11:50

Signature: \_\_\_\_\_ Printed Name and Title \_\_\_\_\_

6. **YOU MUST PRINT CLEARLY!**

Company Name Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Street Address Unit /Suite # Email: \_\_\_\_\_

City State Zip

I have read and understand the the Notice above:

Signature: \_\_\_\_\_ Printed Name and Title \_\_\_\_\_

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County

March 30, 2015 11:00 AM

County of Bucks and Engineer Representatives in Attendance:

Maureen McIlvaine	B.C. Purchasing
ROBERT D. JAMES	DAO
Antonetta Stancu	DAO
Tom Brettell	BECL
DAVID HECKLER	DA
Siane Korman	DA

~~Signature~~