BID NO.: 952-5001	DATE:	11/09/2011			
Overnight Stay / Emergency Department Disposition Program DESCRIPTION OF BID					
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X VENDOR CONFERENCE	BUYER:	Ken Vozza			
BID OPENING					
Turning Point of Cent. CA.	DR	H			
Scott Hollander	Bri	COMPANY NAME	<u>'</u>		
P.O. Box 7447		COMPANY REPRESENTATI	VE		
COMPANY ADDRESS		COMPANY ADDRESS			
Shallander altage or a		CITY/STATE/ZIP			
Shollander latpocc.org		E-MAIL ADDRESS			
5599999-8983 559-321-0301 PHONE NUMBER FAX NUMBER	PHONE NUME	BER	FAX NUMBER		
WEST CAPE		COMPANY NAME			
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4411 ELENGS Stryon AD.					
FRESNID CA.		COMPANY ADDRESS			
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WESTCARE COMPANY NAME	-	COMPANY NAME			
HA CRUZ M. D. COMPANY REPRESENTATIVE		COMPANY REPRESENTATIVE			
COMPANY ADDRESS		COMPANY ADDRESS			
herbert cruz @ westcare com	-	CITY/STATE/ZIP			
herbert cruz @ westcare com		E-MAIL ADDRESS			
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Martha Sears MITSA COMPANY REPRESENTATIVE		COMPANY REPRESENTATIVE			
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Crestwood COMPANY NAME				
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COMPANY REPRESENTATIVE  4411 E KINGS CAN YOUR RD  COMPANY ADDRESS		COMPANY REPRESENTATIV	Ē	
		COMPANY ADDRESS		
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453-5199 PHONE NUMBER FAX NUMBER	PHONE NUME	BER	FAX NUMBER	
TURNING POINT OF CENTRAL,	91,/vc	COMPANY NAME		
RAY BANKS				
COMPANY REPRESENTATIVE  FOR BOX 7447		COMPANY REPRESENTATIVE		
GOMPANY ADDRESS VIGACIA CA 93290	2442	COMPANY ADDRESS		
TPOCCREGIO AOL. COM		CITY/STATE/ZIP		
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From Boly Vival Health		COMPANY NAME		
154 Weigent COMPANY REPRESENTATIVE		COMPANY REPRESENTATIVE		
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76 429 5427 556 439 5411		E-MAIL ADDRESS		
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