



SPECIALTY PRODUCTS
Delivering Value

BRANCH OFFICES

SANTA FE SPRINGS, CA
15415 Marquardt Ave.
Santa Fe Springs, CA 90670
(800) 352-3870
Fax (562) 802-3296

SACRAMENTO, CA
524 Galveston St.
W. Sacramento, CA 95691
(800) 533-0816
Fax (916) 374-0900

FRESNO, CA
2478 N. Sunnyside Ave.
Fresno, CA 93727
(800) 827-4389
Fax (559) 291-2433

LAS VEGAS, NV
3455 W. Lake Mead Blvd.
N. Las Vegas, NV 89032
866-472-3695
Fax (702) 638-8515

SAN JOSE, CA
1155 Mabury Road
San Jose, CA 95133
(800) 767-0719
Fax (408) 287-2004

PORTLAND, OR
13010 NE David Circle
Portland, OR 97230
(877) 827-4381
Fax (503) 252-2782

SAN MARCOS, CA
431 Daisy Lane
San Marcos, CA 92078
(800) 237-5233
Fax (760) 471-3351

TEMPE, AZ
1059 W. Geneva Drive
Tempe, AZ 85282
(800) 352-5548
Fax (480) 517-0766

For a complete list of events visit:
www.target-specialty.com

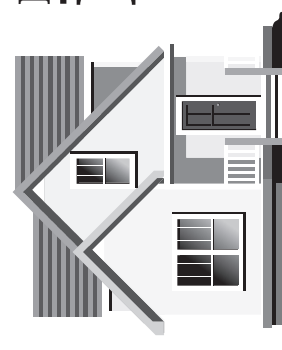
PRESORTED
FIRST CLASS
U.S. POSTAGE
PAID
PERMIT No. 5
ARTESIA, CA

TARGET SPECIALTY PRODUCTS
15415 MARQUARDT AVE., SANTA FE SPRINGS, CA 90670
ADDRESS SERVICE REQUESTED



FUMIGATOR'S FORUM

LA MIRADA, CA
Thursday, April 22, 2010
Holiday Inn



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FUMIGATOR'S FORUM

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Thursday, April 22, 2010
Holiday Inn

Please join us for Fumigator's Forum, a quarterly meeting serving the interests of fumigators in Southern California.





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FUMIGATOR'S FORUM

LA MIRADA, CA
Thursday, April 22, 2010

Please join us for Fumigator's Forum, a quarterly meeting serving the interests of fumigators in Southern California.



REGISTRATION:

6:00 pm

PROGRAM:

6:30 - 8:30 pm

CREDITS:

1.0 hour Rules & Regs SPCB (applied for)

1.0 hour Laws & Regs DPR (applied for)

FEE:

\$30.00 per person (includes dinner)

TOPIC:

- Hazmat Security Plan: Are You in Compliance?

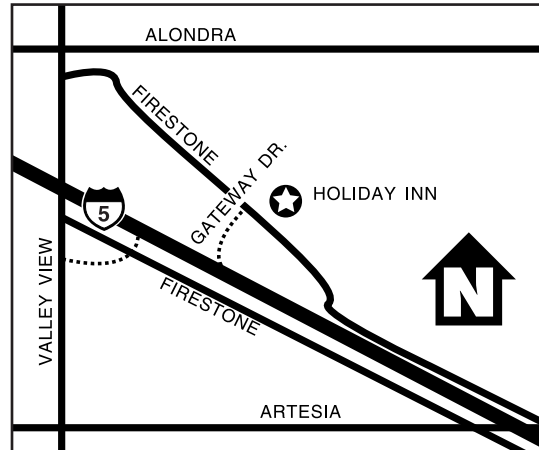
LOCATION:

Holiday Inn

14299 Firestone Blvd.

La Mirada, CA 90638

877-863-4780



Reservation Required

RSVP by: 4/15/2010

Mail registration along with payment to:

Target Specialty Products

Attn: Phyllis Riedman

15415 Marquardt Ave.

Santa Fe Springs, CA 90670

800-352-3870

Fax 562-802-3296

(This form may be photo-copied)

FUMIGATOR'S FORUM Registration Form



Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

NAME OF REGISTRANT(S): _____

Enclosed is my payment of \$ _____ for _____ people

Check VISA/MC Card# _____

Signature _____

Exp. _____ V-Code _____