

ASIAN/PACIFIC AMERICAN

Small-Business Development Resource Directory



Prepared by the
Asian/Pacific American
Employment and Economic
Development Task Force
of the
National Conference
of Christians & Jews

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**NATIONAL
 CONFERENCE OF
 CHRISTIANS AND
 JEWS**
 Reducing Inevitable Conflict / Advancing Social Justice

ROBERT M. JONES
 National Senior Vice President
 Executive Director, Southern California Region

September, 1987

Guide to Using this Booklet

This booklet has been created with the help of the major corporations, utilities, government agencies, and other firms in Southern California for use by businesses that are primarily owned and operated by Asian and Pacific Island Americans. The companies which are listed in this booklet would like to have more Asian and Pacific Islanders as their suppliers of goods and of services. It is often difficult for small businesses to know how to contact a large company in order to attempt to become a vendor, and this booklet is intended to assist you in making that first contact with the right person in the company so that your bid can be given full consideration.

To make use of this booklet, simply call or write to the contact person or office listed for each company or agency and tell them that you are an Asian or Pacific Island minority vendor. They will then assist you in making a bid to offer your products or services to them. Each company has its own methods for qualifying a vendor and each has its own forms to fill and procedures to follow. The companies listed here, however, have expressed a desire to have more Asian and Pacific Island minority vendors, and many of them have special programs and staff to assist you in making the best possible case.

This booklet was prepared through the efforts of three volunteer organizations, LEAP (Leadership Education for Asian-Pacific), PACE (Pacific Asian Consortium in Employment), and the NCCJ (National Conference of Christians and Jews). Each of these organizations are led primarily by volunteers - people from business, education and community service organizations. The goal of LEAP, PACE, and of the NCCJ is to speed the racial and ethnic integration of the United States and of Southern California. One of the means to this goal is to assist more minority businesses in becoming successful vendors to the major businesses, hospitals, and government agencies of our region.

We thank the May Company of Southern California for printing this directory and Pacific Bell for preparing the text and helping in so many other ways. Special thanks go, as well, to Chih Hsing Pei, who arranged for the translations of this "Guide," and to AAED, Inc., the Asian Pacific Legal Center, Korean American Coalition, LA-Area Chamber of Commerce, and Mechanics National Bank.

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Supported by industry gifts and requests.
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이 책자는 아시아태평양경제가 소유하고 있는 중소기업들을 위하여, 금융 기관, 오인회사, 권위회사들 여러 공공사업회사를 비롯한 정부 기관에 의하여 제작되었습니다. 여기에 수록된 기업들은 아시아태평양경제가 운영하는 회사들과 납품 계약을 비롯한 여러가지 비즈니스상의 거래를 원하는 대기업들입니다.

대부분의 중소기업, 특히 소수민족 계열의 중소기업들이 여러 대기업들과 거래를 하는 데 많은 어려움을 겪고 있으며, 이 책자는 이들 소수민족 계열 기업인들이 대기업의 담당자들과 연결되어, 공개입찰이나 납품 계약서에 여러가지 도움을 받을 수 있도록 제작되었습니다.

각 기업마다 구매계약이나 납품 계약을 권정한 때 각각 다른 방법을 사용하고 있으며, 이에 따라 제출 서류나 자격요건 절차적 차도 독자적인 방법으로 심사, 검정을 내립니다. 따라서, 많은 기업인들이 어려움을 겪고 있는 실정입니다.

이 책자에 수록된 기업들은 아시아태평양경제의 기업들과 거래하기를 희망하는 대기업들로, 이를 위해 특별보고 프로그램 설치하여 운영하며, 또 담당직원을 고용, 최대한으로 도움을 주고 있습니다.

주로 자원봉사자에 의하여 운영되는 I E A P (아시아태평양경제지도자포럼협회), P A C E (아시아태평양경제적응훈련원), 그리고 N C C J (전국유태기독교협회) 등, 세 단체의 노력으로 이 책자가 반가이게 되었으며, 이 책자를 이용, 보다 많은 아시아태평양경제 사업인들이 대기업, 정부 기관과 원활한 비즈니스 관계를 유지, 남가주를 비롯한 미국 내외 여러 다른 인종들과 잘 화합되어 사수 있는 한 방법으로 제작되었습니다.

이 책자의 인쇄를 맡아준 메이컴파니 배화점, 자료 정리를 비롯한 기타 여러가지 도움을 준 패시피 베, 번역을 맡아준 페이지시씨에게 진심으로 감사사를 드립니다.

올리암 오피박사(UCLA 경영대학원)

캐롤린 데마시어스(패시피 베)

제리 하부쉬

N C C J 아시아태평양경제공개제반권위원회

N C C J 부디렉터

경제발전소위원회 공동위원장

親摯的朋友：

這份亞裔小商家手冊是亞裔太平洋就業及經濟開發小組的資深副總裁老貝爾在洛杉磯分校 Bill Cuchi 教授及電話公司 Carolyn de Mucias 的領導下，及許多非營利性社團的合作下所製成的。

這些社團包括 LEAP (亞裔企業培育協會)，NCCJ (全國基督徒及猶太人協會)，PACC (亞裔企業協會)；AAEDC (亞裔經商會)；Asian Pacific Legal Center (亞裔法律中心)；Korean American Association (韓裔協會)；Mechanics National Bank (機械銀行)；May Company (梅百貨公司)；及 Los Angeles Chamber of Commerce (洛杉磯商會)。

這份手冊包含許多願意和亞裔小商家做生意的公司和聯繫人的姓名及電話。請您直接和他們聯絡。

祝您生意發達。

Các bạn hữu thân mến:

Quyển sách tham khảo nơi về phát triển kinh tế cho Cộng Đồng Giới Tiểu Thương Gia Á Kiêu đã được soạn thảo bởi tiểu ban đặc trách phát triển việc làm và kinh tế của Giáo Hội Cơ Đốc Giáo Á Kiêu/Thái Bình Dương và đã được Giáo Sư Bill Ouchi, Trưởng Đại Học U.C.L.A. hướng đạo cùng với sự hợp tác của Công Ty Điện Thoại Carolyn Webb De Macias, Pacific Bell và các cố cấu tổ chức xã hội/vô sanh lỗi đã gop phần vào việc tạo nên soạn phẩm này.

Danh sách các cố quan đó là LEAP (Hướng Đạo Giáo Dục cho Á Kiêu/T.B.D.): NCCJ (Hiệp Hội Cơ Đốc Giáo Toàn Quốc và Người Do Thái); PACE (cố quan tìm việc làm cho người Á Kiêu); AADEC (Hội Thanh Tin Lành). Asian Pacific Legal Center (Trung tâm pháp lý Á Kiêu). Korean American Coalition (Hiệp Hội thân hữu Đại Hàn-Hoa Kỳ). Mechanics National Bank; May Company và Los Angeles Chamber of Commerce (Hội thương nghiệp của L.A.).

Một trong những mục đích chính của soạn phẩm này là trợ giúp cho giới tiểu thương nghiệp dân thiểu số (Á Kiêu) tro nên giới thương nghiệp chủ yếu như các bệnh viện và cố quan, đại viên nhà nước tại địa phương của chúng ta, v.v...

Danh sách và số điện thoại của các giới thương nghiệp và các tổ chức cố quan có ý nguyên hợp tác với giới tiểu thương nghiệp đã được liệt kê trong soạn phẩm này. Các bạn hữu có thể liên lạc trực tiếp với các tổ chức trên. Chúc các bạn may mắn.

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AGENCIES AND GOVERNMENTAL UNITS (A)

I. AGENCY NAME: Base Contracting Division (A1)

ADDRESS: 63 MAM/LCC, Norton AFB, California 92409

TELEPHONE #: (714) 382-7845 CITY: Norton AFB

STATE/ZIP: CA 92409

CONTACT/STAFF PERSON: Chief DuRousseau

II. AGENCY STATUS (Please indicate one or more of the following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION: _____

B. GOVERNMENT (Local, state, U.S.): United States Gov't.

C. NON PROFIT: Non profit

IF NON-PROFIT,
ASSOCIATED WITH:

1. UNIVERSITY/COLLEGE: _____

2. CHAMBER OF COMMERCE: _____

3. BUSINESS ASSOCIATION: _____

4. OTHER: Government

III. FEE?

YES ☐ NO ☒ IF YES, COST _____ (per year, per month, per program?)

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY AGENCY:

The Base Contracting Division is responsible for purchasing supplies, and services. Some examples of supplies & services purchased are: Computer hardware/software, plumbing, electrical, furniture, tools, construction services, custodial services, etc. In order for the Government to purchase from any particular vendor, this vendor must be a regular dealer/or manufacturer and in the case services, vendor/contractor must be responsible, i.e., financial and otherwise.

V. YEARS AGENCY HAS OPERATED: _____

VI. SERVICES OFFERED (Please describe briefly):

A. FINANCIAL ASSISTANCE: _____

B. TECHNICAL ASSISTANCE: _____

C. MANAGERIAL ASSISTANCE: _____

D. ASSISTANCE IN LOCATING QUALIFIED EMPLOYEES: _____

E. CONTRACT/PROCUREMENT PROCEDURES INFORMATION AND/OR ASSISTANCE: We provide all assistance/

procedures regarding during business with the government, i.e., bidding on contracts and submitting quotes.

F. OTHER: _____

G. MULTILINGUAL CAPABILITY: NA

I. COMPANY OR
AGENCY NAME: Defense Contract Administration Service

Management Area (DCASMA), El Segundo (A2)

ADDRESS: 222 North Sepulveda Blvd.

TELEPHONE #: (213) 335-3509 CITY: El Segundo

STATE/ZIP: CA 90245-4320

CONTACT/STAFF PERSON: Ruby L. Morris, Deputy for Small
Business

II. AGENCY STATUS (Please indicate one or more of the
following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION: _____

B. GOVERNMENT (Local, state, U.S.): U.S.

C. NON PROFIT: _____

IF NON-PROFIT,
ASSOCIATED WITH:

1. UNIVERSITY/COLLEGE: _____

2. CHAMBER OF COMMERCE: _____

3. BUSINESS ASSOCIATION: _____

4. OTHER: _____

III. FEE?

YES _____ NO X IF YES, COST _____ (per year, per
month, per program?)

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY
AGENCY:

The Department of Defense is ready to do business, on a
competitive basis, with component firms which can supply
the products or services it needs. Defense purchasing
activities are particularly anxious to establish contacts
with small business firms, disadvantaged business firms,
and firms in labor surplus areas.

V. YEARS AGENCY HAS OPERATED: 21 years

VI. SERVICES OFFERED (please describe briefly):

A. FINANCIAL ASSISTANCE: _____

B. TECHNICAL ASSISTANCE: _____

C. MANAGERIAL ASSISTANCE: _____

D. ASSISTANCE IN LOCATING
QUALIFIED EMPLOYEES: X

E. CONTRACT/PROCUREMENT
PROCEDURES INFORMATION
AND/OR ASSISTANCE: X

F. OTHER: _____

G. MULTILINGUAL CAPABILITY: _____

I. COMPANY OR AGENCY NAME: So. California Rapid Transit District (A3)

ADDRESS: 425 S. Main Street

TELEPHONE #: (213) 972-3223 CITY: Los Angeles

STATE/ZIP: CA 90013

CONTACT/STAFF PERSON: Angelica Martinez, DBE/WBE Manager

II. AGENCY STATUS (Please indicate one or more of the following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION: _____

B. GOVERNMENT (Local, state, U.S.): Local/State/US

C. NON PROFIT: _____

IF NON-PROFIT,
ASSOCIATED WITH:

1. UNIVERSITY/COLLEGE: _____

2. CHAMBER OF COMMERCE: _____

3. BUSINESS ASSOCIATION: _____

4. OTHER: _____

III. FEE?

YES _____ NO X IF YES, COST _____ (per year, per month, per program?)

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY AGENCY:

None

V. YEARS AGENCY HAS OPERATED: 1964

VI. SERVICES OFFERED (Please describe briefly):

A. FINANCIAL ASSISTANCE: _____

B. TECHNICAL ASSISTANCE: _____

C. MANAGERIAL ASSISTANCE: _____

D. ASSISTANCE IN LOCATING QUALIFIED EMPLOYEES: _____

E. CONTRACT/PROCUREMENT PROCEDURES INFORMATION AND/OR ASSISTANCE: For Disadvantaged and

Women's Business Enterprise

F. OTHER: _____

G. MULTILINGUAL CAPABILITY: Spanish

I. AGENCY NAME: State of California, Department of General Services (A4)

ADDRESS: 1808 14th Street, Suite 100

TELEPHONE #: (916) 322-5060 CITY: Sacramento

STATE/ZIP: CA 95814

CONTACT/STAFF PERSON: Sally McSherry, Administrative Assistant

II. AGENCY STATUS (Please indicate one or more of the following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION: _____

B. GOVERNMENT (Local, state, U.S.): State of California

C. NON PROFIT: _____

IF NON-PROFIT,
ASSOCIATED WITH:

1. UNIVERSITY/COLLEGE: _____

2. CHAMBER OF COMMERCE: _____

3. BUSINESS ASSOCIATION: _____

4. OTHER: State of California

III. FEE?

YES _____ NO X IF YES, COST _____ (per year, per month, per program?)

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY AGENCY:

V. YEARS AGENCY HAS OPERATED: 13 years

VI. SERVICES OFFERED (please describe briefly):

A. FINANCIAL ASSISTANCE: _____

B. TECHNICAL ASSISTANCE: _____

C. MANAGERIAL ASSISTANCE: _____

D. ASSISTANCE IN LOCATING QUALIFIED EMPLOYEES: _____

E. CONTRACT/PROCUREMENT PROCEDURES INFORMATION AND/OR ASSISTANCE: Yes

F. OTHER: _____

G. MULTILINGUAL CAPABILITY: Hispanic, Chinese and Japanese

I. COMPANY OR AGENCY NAME: Los Angeles County Community Development

Commission (A5)

ADDRESS: 4800 Brooklyn Avenue/P.O. Box 22018

TELEPHONE #: (213) 260-2689 CITY: Los Angeles

STATE/ZIP: CA 90022

CONTACT/STAFF PERSON: David Morrish

II. AGENCY STATUS (Please indicate one or more of the following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION: _____

B. GOVERNMENT (Local, state, U.S.): _____ County _____

C. NON PROFIT: _____

IF NON-PROFIT,
ASSOCIATED WITH:

1. UNIVERSITY/COLLEGE: _____

2. CHAMBER OF COMMERCE: _____

3. BUSINESS ASSOCIATION: _____

4. OTHER: HUD

III. FEE?

YES NO X IF YES, COST _____ (per year, per month, per program?)

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY AGENCY:

V. YEARS AGENCY HAS OPERATED: 30

VI. SERVICES OFFERED (please describe briefly):

A. FINANCIAL ASSISTANCE: _____

B. TECHNICAL ASSISTANCE: _____

C. MANAGERIAL ASSISTANCE: _____

D. ASSISTANCE IN LOCATING QUALIFIED EMPLOYEES: _____

E. CONTRACT/PROCUREMENT PROCEDURES INFORMATION AND/OR ASSISTANCE: _____

F. OTHER: Economic Development, Low Income Housing

Assistance and Development Planning

G. MULTILINGUAL CAPABILITY: _____

I. AGENCY NAME: L.A. City Schools (A6)

ADDRESS: 1425 S. San Pedro Street

TELEPHONE #: (213) 742-7735 CITY: Los Angeles

STATE/ZIP: CA 90015

CONTACT/STAFF PERSON: Charles Stovall

II. AGENCY STATUS (please indicate one or more of the following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION: _____

B. GOVERNMENT (Local, state, U.S.?): _____ City _____

C. NON PROFIT: _____

IF NON-PROFIT,
ASSOCIATED WITH:

1. UNIVERSITY/COLLEGE: _____

2. CHAMBER OF COMMERCE: _____

3. BUSINESS ASSOCIATION: _____

4. OTHER: L. A. City Schools

III. FEE?

YES _____ NO X IF YES, COST _____ (per year, per
month, per program?)

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY
AGENCY:

Small businesses in commodities - contractors

(construction)

V. YEARS AGENCY HAS OPERATED: 16 years

VI. SERVICES OFFERED (please describe briefly):

A. FINANCIAL ASSISTANCE: _____

B. TECHNICAL ASSISTANCE: _____ X

C. MANAGERIAL ASSISTANCE: _____

D. ASSISTANCE IN LOCATING
QUALIFIED EMPLOYEES: _____

E. CONTRACT/PROCUREMENT
PROCEDURES INFORMATION
AND/OR ASSISTANCE: X Preference Program 10% for
minorities and females.

F. OTHER: _____

G. MULTILINGUAL CAPABILITY: 0

GOVERNMENT TECHNICAL ASSISTANCE AGENCIES/GROUPS (B)

I. AGENCY NAME: United States Small Business Administration,
District Office (B1)

ADDRESS: 880 Front Street, Suite 4-S-29

TELEPHONE #: (619) 293-7250 CITY: San Diego

STATE/ZIP: CA 92188

CONTACT/STAFF PERSON: George Chandler, District Director,
or Riley Johnson, Assistant District Director

II. AGENCY STATUS (Please indicate one or more of the following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION: _____

B. GOVERNMENT (Local, state, U.S.?): _____ Federal

C. NON PROFIT: _____

IF NON-PROFIT,
ASSOCIATED WITH:

1. UNIVERSITY/COLLEGE: _____

2. CHAMBER OF COMMERCE: _____

3. BUSINESS ASSOCIATION: _____

4. OTHER: _____

III. FEE? Various user fees apply to services other than management counseling, which is free.

YES _____ NO _____ IF YES, COST _____ (per year, per month, per program?)

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY AGENCY:

Clients should be principals in existing small businesses or in proposed small business. The businesses must be organized for profit, independently owned and operated, not dominant in its field, and not engaged in investment or speculative activities.

V. YEARS AGENCY HAS OPERATED: 33 years

VI. SERVICES OFFERED (please describe briefly):

A. FINANCIAL ASSISTANCE: Loans and bond guarantees;
restricted direct loans.

B. TECHNICAL ASSISTANCE: Technical counseling by
volunteer counselors.

C. MANAGERIAL ASSISTANCE: Counseling and training by
various resources.

D. ASSISTANCE IN LOCATING QUALIFIED EMPLOYEES: N/A

E. CONTRACT/PROCUREMENT PROCEDURES INFORMATION AND/OR ASSISTANCE: Federal contract assistance for
qualified firms; counseling by volunteer counselors.

F. OTHER: _____

G. MULTILINGUAL CAPABILITY: Varied and limited.

I. AGENCY NAME: U.S. Small Business Administration (B2)

ADDRESS: 350 South Figueroa St., Ste. 600

TELEPHONE #: (213) 894-7173 CITY: Los Angeles

STATE/ZIP: CA 90071-1377

CONTACT/STAFF PERSON: Mr. Joseph F. Sachs, Asst. Distr.

Director: Bus. Dev.

II. AGENCY STATUS (Please indicate one or more of the following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION: _____

B. GOVERNMENT (Local, state, U.S.): U.S.

C. NON PROFIT: _____

IF NON-PROFIT,
ASSOCIATED WITH: _____

1. UNIVERSITY/COLLEGE: _____

2. CHAMBER OF COMMERCE: _____

3. BUSINESS ASSOCIATION: _____

4. OTHER: _____

III. FEE?

YES ☐ NO ☒ IF YES, COST _____ (per year, per month, per program?)

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY AGENCY:

Small business (start-up and/or existing) that is independently owned and not dominant in its field. LA District covers LA, Orange, San Bernardino, Santa Barbara & Ventura Counties.

V. YEARS AGENCY HAS OPERATED: Since 1953

VI. SERVICES OFFERED (Please describe briefly):

A. FINANCIAL ASSISTANCE: Guaranteed loans through a lender & Direct loans.

B. TECHNICAL ASSISTANCE: Counsel in all areas, especially selling to Gov't.

C. MANAGERIAL ASSISTANCE: Includes S.C.O.R.E. free guidance, also SBI

D. ASSISTANCE IN LOCATING QUALIFIED EMPLOYEES: No

E. CONTRACT/PROCUREMENT PROCEDURES INFORMATION AND/OR ASSISTANCE: Guidance to sell to U.S. Gov't., & Prime Contractors.

F. OTHER: Specialized programs: WOMEN IN BUSINESS, VETERANS AFFAIRS, Small Business Innovation & Research, International Trade, Private Sector.

NOTE: ISSUES A CALENDAR OF TRAINING ONCE A MONTH
(Phone 213-894-2956)

G. MULTILINGUAL CAPABILITY: Office has Hispanic, Korean.

I. AGENCY NAME: Small Business Institute (Sponsored by:)

U.S. Small Business Administration (B3)

ADDRESS: 1441 L St. N.W.

TELEPHONE #: (202) 353-6628 CITY: Washington

STATE/ZIP: D.C. 20416

CONTACT/STAFF PERSON: Chris Kobler

II. AGENCY STATUS (Please indicate one or more of the following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION: _____

B. GOVERNMENT (Local, state, U.S.): U.S.

C. NON PROFIT: _____

IF NON-PROFIT,
ASSOCIATED WITH:

1. UNIVERSITY/COLLEGE: X

2. CHAMBER OF COMMERCE: _____

3. BUSINESS ASSOCIATION: _____

4. OTHER: _____

III. FEE? Although user fee is under consideration not to exceed \$400.00

YES NO X IF YES, COST _____ (per year, per month, per program?)

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY AGENCY:

U.S. Citizen - Small Business owner/manager

V. YEARS AGENCY HAS OPERATED: 15 years

VI. SERVICES OFFERED (Please describe briefly):

A. FINANCIAL ASSISTANCE: _____

B. TECHNICAL ASSISTANCE: Management counseling performed by qualified University students under faculty supervision.

C. MANAGERIAL ASSISTANCE: _____

faculty supervision

D. ASSISTANCE IN LOCATING QUALIFIED EMPLOYEES: _____

E. CONTRACT/PROCUREMENT PROCEDURES INFORMATION AND/OR ASSISTANCE: _____

F. OTHER: _____

G. MULTILINGUAL CAPABILITY: _____

I. COMPANY OR
AGENCY NAME: Department of Commerce, Office of Small
Business (B4)

ADDRESS: 1121 L Street, Suite 600

TELEPHONE #: (916) 445-6545 CITY: Sacramento

STATE/ZIP: CA 95814

CONTACT/STAFF PERSON: Keith Christensen, Deputy Director

II. AGENCY STATUS (Please indicate one or more of the following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION: _____

B. GOVERNMENT (Local, state, U.S.?): _____ X

C. NON PROFIT: _____

IF NON-PROFIT,
ASSOCIATED WITH:

1. UNIVERSITY/COLLEGE: _____

2. CHAMBER OF COMMERCE: _____

3. BUSINESS ASSOCIATION: _____

4. OTHER: _____

III. FEE? _____

YES _____ NO X IF YES, COST _____ (per year, per month, per program?)

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY AGENCY:

Small business located in California and unable to secure conventional financing or credit with the private sector.

V. YEARS AGENCY HAS OPERATED: N/A

VI. SERVICES OFFERED (please describe briefly):

A. FINANCIAL ASSISTANCE: Yes

B. TECHNICAL ASSISTANCE: Yes

C. MANAGERIAL ASSISTANCE: Yes

D. ASSISTANCE IN LOCATING QUALIFIED EMPLOYEES: No

E. CONTRACT/PROCUREMENT PROCEDURES INFORMATION AND/OR ASSISTANCE: No

F. OTHER: _____

G. MULTILINGUAL CAPABILITY: None

I. AGENCY NAME: Mayor's Office of Small Business Assistance,
City of Los Angeles (B5)

ADDRESS: 200 N. Spring St., Rm. 1400, Los Angeles, CA 90012

TELEPHONE #: (213) 485-6142 CITY: Los Angeles

STATE/ZIP: CA 90012

CONTACT/STAFF PERSON: Wilfred L. Marshall, Director

II. AGENCY STATUS (Please indicate one or more of the following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION: _____

B. GOVERNMENT (Local, state, U.S.): City of Los Angeles

C. NON PROFIT: _____

IF NON-PROFIT,
ASSOCIATED WITH:

1. UNIVERSITY/COLLEGE: _____

2. CHAMBER OF COMMERCE: _____

3. BUSINESS ASSOCIATION: _____

4. OTHER: _____

III. FEE? YES ☐ NO ☒ IF YES, COST _____ (per year, per month, per program?)

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY AGENCY:

None absolute, though the direction is toward assistance to "small" business, as opposed to large. Additionally, City ordinance provides a 5% preference to "local" firms, generally those in the Los Angeles area. Also, the City has goals and policies to assist Minority & Women owned firms.

V. YEARS AGENCY HAS OPERATED: 1975

VI. SERVICES OFFERED (Please describe briefly):

A. FINANCIAL ASSISTANCE: Technical assistance & referral only (no loan programs)

B. TECHNICAL ASSISTANCE: Oriented toward government contracting

C. MANAGERIAL ASSISTANCE: General counseling and referrals to specialists

D. ASSISTANCE IN LOCATING QUALIFIED EMPLOYEES: No

E. CONTRACT/PROCUREMENT PROCEDURES INFORMATION AND/OR ASSISTANCE: Yes

F. OTHER: _____

G. MULTILINGUAL CAPABILITY: Spanish only

I. COMPANY OR AGENCY NAME: Oxnard Minority Business Development Center (B6)

ADDRESS: 451 W. Fifth St., Oxnard, CA 93030

TELEPHONE #: (805) 483-1123 CITY: Oxnard

STATE/ZIP: CA 93030

CONTACT/STAFF PERSON: Mr. Victor Fontaine

II. AGENCY STATUS (Please indicate one or more of the following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION:

B. GOVERNMENT (Local, state, U.S.): U.S. Dept. of Commerce, Office of Minority Business Dev. Agency

C. NON PROFIT:

IF NON-PROFIT,
ASSOCIATED WITH:

1. UNIVERSITY/COLLEGE: _____

2. CHAMBER OF COMMERCE: _____

3. BUSINESS ASSOCIATION: _____

4. OTHER: _____

III. FEE? \$10 per hour if minority business grosses under \$500,000 per year. If over \$500,000 - then \$17.50 per hour.

YES X NO IF YES, COST (per year, per month, per program?)

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY AGENCY:

Ethnic minority and small business.

V. YEARS AGENCY HAS OPERATED: 3 years

VI. SERVICES OFFERED (Please describe briefly):

A. FINANCIAL ASSISTANCE: Set up Accounting Systems

S.B.A. & Conventional Loan Packaging

B. TECHNICAL ASSISTANCE: Market & Cost Feasibility Studies.

C. MANAGERIAL ASSISTANCE: Management/Organization Evaluations & Restructuring

D. ASSISTANCE IN LOCATING QUALIFIED EMPLOYEES: Personnel Matching & Evaluation

E. CONTRACT/PROCUREMENT PROCEDURES INFORMATION AND/OR ASSISTANCE: Identify Governmental & Private sector contracts. Also assist in contract bid forms and contract bonding if required.

F. OTHER: Assist in LA (Minority Disadvantaged) certification with S.B.A. Also minority certification with L.A. Dept. of Transportation.

G. MULTILINGUAL CAPABILITY: Spanish, Portuguese, German

I. AGENCY NAME: U. S. Small Business Administration (B7)

ADDRESS: 2005 North Central Avenue, 5th Floor

TELEPHONE #: (602) 261-3732 CITY: Phoenix

STATE/ZIP: AZ 85004

CONTACT/STAFF PERSON: Vince Tammelleo, Assistant District

Director, Business Development Division

II. AGENCY STATUS (Please indicate one or more of the following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION: _____

B. GOVERNMENT (Local, state, U.S.): U.S.

C. NON PROFIT: _____

IF NON-PROFIT,
ASSOCIATED WITH:

1. UNIVERSITY/COLLEGE: _____

2. CHAMBER OF COMMERCE: _____

3. BUSINESS ASSOCIATION: X

4. OTHER: _____

III. FEE?

YES NO X IF YES, COST _____ (per year, per
month, per program?)

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY
AGENCY:

U.S. federally tax-funded agency.

V. YEARS AGENCY HAS OPERATED: Since 1953

VI. SERVICES OFFERED (Please describe briefly):

A. FINANCIAL ASSISTANCE: Yes

B. TECHNICAL ASSISTANCE: Yes

C. MANAGERIAL ASSISTANCE: Yes

D. ASSISTANCE IN LOCATING
QUALIFIED EMPLOYEES: No

E. CONTRACT/PROCUREMENT
PROCEDURES INFORMATION
AND/OR ASSISTANCE: Yes

F. OTHER: No

G. MULTILINGUAL CAPABILITY: _____

AGENCY RESPONSE FORM FOR DIRECTORY (C)

I. AGENCY NAME: ASIAN BUSINESS ASSOCIATION (C1)

ADDRESS: 12611 Hidden Creek Way, #B

TELEPHONE #: 213-926-6820 CITY: Cerritos

STATE/ZIP: California 90701

CONTACT/STAFF PERSON: Phil Chen - President

II. AGENCY STATUS (Please indicate one or more of the following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION: _____

B. GOVERNMENT (Local, state, U.S.): _____

C. NON PROFIT: X

IF NON-PROFIT,
ASSOCIATED WITH:

1. UNIVERSITY/COLLEGE: _____

2. CHAMBER OF COMMERCE: _____

3. BUSINESS ASSOCIATION: X

4. OTHER: _____

III. FEE?

YES X NO _____ IF YES, COST \$1.00 (per year) per
month, per program?

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY AGENCY:

General Member must be an Asian Business Owner who owns at least 50% of his own business. We also have Corporate, Associate, and Student members.

V. YEARS AGENCY HAS OPERATED: 9

VI. SERVICES OFFERED (Please describe briefly):

A. FINANCIAL ASSISTANCE: X

B. TECHNICAL ASSISTANCE: X

C. MANAGERIAL ASSISTANCE: X

D. ASSISTANCE IN LOCATING QUALIFIED EMPLOYEES: X

E. CONTRACT/PROCUREMENT PROCEDURES INFORMATION AND/OR ASSISTANCE: X

F. OTHER: _____

G. MULTILINGUAL CAPABILITY: Chin., Jap., Korean, Thai and Viet Nam

I. AGENCY NAME: BUSINESS DEVELOPMENT CENTER OF SOUTHERN CALIFORNIA (C2)

ADDRESS: 3807 Wilshire Boulevard, Suite 700

TELEPHONE #: 213-380-9471 CITY: Los Angeles

STATE/ZIP: California, 90010

CONTACT/STAFF PERSON: Cleveland O. Neil, President

II. AGENCY STATUS (Please indicate one or more of the following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION: X

B. GOVERNMENT (Local, state, U.S.): U.S.

C. NON PROFIT:

IF NON-PROFIT,
ASSOCIATED WITH:

1. UNIVERSITY/COLLEGE:

2. CHAMBER OF COMMERCE:

3. BUSINESS ASSOCIATION:

4. OTHER:

III. FEE?

\$10.00 &

YES X NO IF YES, COST \$17.50 (per hour) per
year, per month, per
program?)

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY
AGENCY:

Competitive minority-owned business.

V. YEARS AGENCY HAS OPERATED: 9

VI. SERVICES OFFERED (please describe briefly):

A. FINANCIAL ASSISTANCE: Loan Prop. Prep. Financial Analy.

B. TECHNICAL ASSISTANCE: Marketing Asst. Feasibility Study

C. MANAGERIAL ASSISTANCE: General Mgmt. Admin. Assistance

D. ASSISTANCE IN LOCATING
QUALIFIED EMPLOYEES: N/A

E. CONTRACT/PROCUREMENT
PROCEDURES INFORMATION
AND/OR ASSISTANCE: Brokering and Matching Assistance
for our clients.

F. OTHER: Certification of women and minority-owned
businesses.

G. MULTILINGUAL CAPABILITY:

I. AGENCY NAME: LATIN BUSINESS ASSOCIATION (C3)

ADDRESS: P.O. Box 7190

TELEPHONE #: 213-721-4000 CITY: Los Angeles

STATE/ZIP: California, 90022

CONTACT/STAFF PERSON: Maria Guzman Kennedy

II. AGENCY STATUS (Please indicate one or more of the following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION: _____

B. GOVERNMENT (local, state, U.S.?): _____

C. NON PROFIT: _____

IF NON-PROFIT,
ASSOCIATED WITH:

1. UNIVERSITY/COLLEGE: _____

2. CHAMBER OF COMMERCE: _____

3. BUSINESS ASSOCIATION: X

4. OTHER: _____

III. FEE?

YES X NO _____ IF YES, COST Various (per year) per
month, per program?)

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY
AGENCY:

Four types of membership: Full - 51% Hispanic Owned;
Associate, Corporate and Student.

V. YEARS AGENCY HAS OPERATED: 11

VI. SERVICES OFFERED (please describe briefly):

A. FINANCIAL ASSISTANCE: _____

B. TECHNICAL ASSISTANCE: X

C. MANAGERIAL ASSISTANCE: X

D. ASSISTANCE IN LOCATING
QUALIFIED EMPLOYEES: _____

E. CONTRACT/PROCUREMENT
PROCEDURES INFORMATION
AND/OR ASSISTANCE: X

Business Education, Economic Development and Advocacy

F. OTHER: _____

G. MULTILINGUAL CAPABILITY: Bilingual Spanish/English

I. AGENCY NAME: L.A. MINORITY BUSINESS DEVELOPMENT CENTER (C4)

ADDRESS: 3460 Wilshire Boulevard, Suite #1006/7

TELEPHONE #: 213-382-5032 CITY: Los Angeles

STATE/ZIP: California, 90010

CONTACT/STAFF PERSON: Phil Vasquez, Executive Director

II. AGENCY STATUS (Please indicate one or more of the following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION: _____

B. GOVERNMENT (Local, state, U.S.?): _____

C. NON PROFIT: _____

IF NON-PROFIT,
ASSOCIATED WITH:

1. UNIVERSITY/COLLEGE: _____

2. CHAMBER OF COMMERCE: _____

3. BUSINESS ASSOCIATION: _____

4. OTHER: _____

III. FEE?

YES X NO _____ IF YES, COST \$50.00 (per hour) per
year, per month, per
program?)

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY
AGENCY:

Minority owned firms and minority individuals that are
potential entrepreneur.

V. YEARS AGENCY HAS OPERATED: 3

VI. SERVICES OFFERED (please describe briefly):

A. FINANCIAL ASSISTANCE: SBA & Fin. Consult. Loans, Bonds

B. TECHNICAL ASSISTANCE: Design Bus. & Mgmt. Plan Package

C. MANAGERIAL ASSISTANCE: Starting Bus. & Fin. Pers. Mgmt.

D. ASSISTANCE IN LOCATING
QUALIFIED EMPLOYEES: Individual Consulting

E. CONTRACT/PROCUREMENT
PROCEDURES INFORMATION
AND/OR ASSISTANCE: Procurement Consulting: Sales

Strategy, Source Development, Team Building, Bid and

Proposal Preparation Procurement Consulting: Brokering,

F. OTHER: Tax Preparation, Special Business Seminars

G. MULTILINGUAL CAPABILITY: Span. French, Chin. Jap.

I. AGENCY NAME: L.A. MINORITY BUSINESS DEVELOPMENT CENTER (C4)

ADDRESS: 3460 Wilshire Boulevard, Suite #1006/7

TELEPHONE #: 213-382-5032 CITY: Los Angeles

STATE/ZIP: California, 90010

CONTACT/STAFF PERSON: Phil Vasquez, Executive Director

II. AGENCY STATUS (Please indicate one or more of the following:)

ASSOCIATED WITH:

A. FOR PROFIT CORPORATION: _____

B. GOVERNMENT (Local, state, U.S.?): _____

C. NON PROFIT: _____

X

IF NON-PROFIT,
ASSOCIATED WITH:

1. UNIVERSITY/COLLEGE: _____

2. CHAMBER OF COMMERCE: _____

3. BUSINESS ASSOCIATION: _____

4. OTHER: _____

X

III. FEE?

YES X NO _____ IF YES, COST \$50.00 (per hour) per
year, per month, per
program?

IV. CRITERIA FOR ELIGIBILITY OF CLIENT FOR SERVICES OFFERED BY
AGENCY:

Minority owned firms and minority individuals that are
potential entrepreneur.

V. YEARS AGENCY HAS OPERATED: 3

VI. SERVICES OFFERED (please describe briefly):

A. FINANCIAL ASSISTANCE: SBA & Fin. Consult. Loans, Bonds

B. TECHNICAL ASSISTANCE: Design Bus. & Mgmt. Plan Package

C. MANAGERIAL ASSISTANCE: Startling Bus. & Fin. Pers. Mgmt.

D. ASSISTANCE IN LOCATING
QUALIFIED EMPLOYEES: Individual Consulting

E. CONTRACT/PROCUREMENT
PROCEDURES INFORMATION
AND/OR ASSISTANCE: Procurement Consulting: Sales

Strategy, Source Development, Team Building, Bid and
Proposal Preparation Procurement Consulting: Brokering,

F. OTHER: Tax Preparation, Special Business Seminars

G. MULTILINGUAL CAPABILITY: Span. French, Chin. Jap.