

# CITY OF LOS ANGELES SPEAKER CARD

14-0943-51

**NOTE: THIS IS A PUBLIC DOCUMENT SUBJECT TO POSTING ON THE CITY'S WEBSITE. YOU ARE NOT REQUIRED TO PROVIDE PERSONAL INFORMATION IN ORDER TO SPEAK, EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU**

Date  
5/18/15

**THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.**

Council File No., Agenda Item, or Case No.  
item 3

I wish to speak before the City Council  
Name of City Agency, Department, Committee or Council

Do you wish to provide general public comment, or to speak for or against a proposal on the agenda?  For proposal  
( ) Against proposal  
( ) General comments

Name: ~~# 2~~ Javier Cano

Business or Organization Affiliation: IW. Marriott / Ritz Carlton

Address: LA.  
Street City State Zip

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

**CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:**

Client Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Client Address: \_\_\_\_\_  
Street City State Zip

Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

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( ) General comments

Name: Peter Kwong

Business or Organization Affiliation: Best Western Dragon Gate

Address: LA, CA  
Street City State Zip

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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( ) Against proposal  
Name: Michael Czarsmki ( ) General comments

Business or Organization Affiliation: Weston Bonaventure

Address: \_\_\_\_\_  
Street City State Zip

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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Date 8/18/15

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() Against proposal  
( ) General comments

Name: Waape from BNLino

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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() Against proposal  
( ) General comments

Name: John WALSH

Business or Organization Affiliation: \_\_\_\_\_

Address: LA  
Street City State Zip

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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DHS

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Date Aug 19 '15

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( ) Against proposal  
(X) General comments

Name: Herminia

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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