

# CITY OF LOS ANGELES SPEAKER CARD

Date: 02/14/2017

Council File No., Agenda Item, or Case  
Item NO. (31) - 16-1442-S1

I wish to speak before the Council

Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? **General Comment**

Name: John Toro

Business or Organization Affiliation: Watermark Retirement Communities

Address: 947 Tiverton Los Angeles Ca 90024  
Street City State Zip

Business Phone: 3102084590 Representing: Watermark

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

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

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

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Name: ALLISON MARTY

Business or Organization Affiliation: ATERMARK RETIREMENT COMMUNITIES

Address: 947 TIVERTON AVE Los Angeles CA 90024  
Street City State Zip

Business Phone: 3102084590 Representing: WATERMARK

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Name: CATHY CARUFEL

Business or Organization Affiliation: WATERMARK RETIREMENT COMMUNITIES

Address: 947 TIVERTON AVE Los Angeles CA 90024  
Street City State Zip

Business Phone: 3102084590 Representing: Watermark Retirement Communities

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Name: Bob Mercer

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

Address: 947 Tiverton  
Street City State Zip

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Name: Rocky Delgadillo

Business or Organization Affiliation: Liner Llp

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Street City State Zip

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Name: Graeme Weston

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

Address: 947 Tiverton  
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Name: Jane Blumenfield

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

Address: 947 Tiverton  
Street City State Zip

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Name: Ellen Isaacs

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

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

Business Phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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Name: Jane Mombache

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

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

Business Phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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Name: Dan

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

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

Business Phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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Name: Ben Reznik

Business or Organization Affiliation: Jmbm

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

Business Phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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