

## 2013 Speaker's Cabinet Inauguration Weekend

Friday, January 18, 2013 - Tuesday, January 22, 2013

### HOTEL REGISTRATION FORM

*Must be completed and received by January 3, 2013*

Name CORKY HALE STOLLER Guest Name MIKE STOLLER  
 Occupation MUSIC PRODUCER Employer SELF  
 Business Address 9100 ORIOLE WAY  
 City LOS ANGELES State CA Zip 90069  
 Phone 310-274-6587 Fax 310-274-4878 E-Mail CORKYHALE@AOL.COM  
 Names and Ages of Children attending \_\_\_\_\_  
 Cell Phone 310-367-6652  
 Emergency Contact PETER STOLLER 310-273-6401  
 Arrival/Departure Flight info (time, date, etc.) Tuesday, a.m. January 22, UNITED

### ACCOMMODATIONS

#### The Liaison Capitol Hill Hotel

415 New Jersey Avenue  
Washington, DC 20001

\$829/per night, plus applicable tax and fees

The DCCC has a limited block of rooms on a first come, first served basis and must be reserved through the DCCC no later than January 3, 2013. The DCCC room block begins on Friday, January 18, 2013 with check out on Tuesday, January 22, 2013 - no exceptions will be made. Those who wish to extend their stay will do so based on room availability at the discretion of the hotel.

**\*\*Please fill out the attached Liaison Hotel Reservation Document**

to confirm your room reservation and fax to Brittany Sherrill at (202) 478-9499 by January 3, 2013\*\*

All authorization forms must be accompanied by a copy of the front of the credit card and photo ID

I am reserving my hotel room through the DCCC and I understand the DCCC will forward the Liaison Hotel Reservation Document to the hotel and I am responsible for all charges to my account including cancellation charges. A 100% deposit is required at the time of booking to guarantee all reservations.

I am making my own hotel arrangements and will not be staying in the DCCC block

Arrival Date January 18, 2013 Departure/Check Out 1/22/13  
 Credit Card Type VISA Credit Card Number 4802 1383 5499 3966  
 Expiration Date 05/15 Name as it appears on the card CORKY HALE

Please return the completed form along with a copy of the front and back of your credit card and photo ID  
by January 3, 2013 to Brittany Sherrill at fax: (202) 478-9499

Address: DCCC, 430 South Capitol Street SE, Washington, DC 20003  
To confirm that we received your form, please call (202) 741-1851

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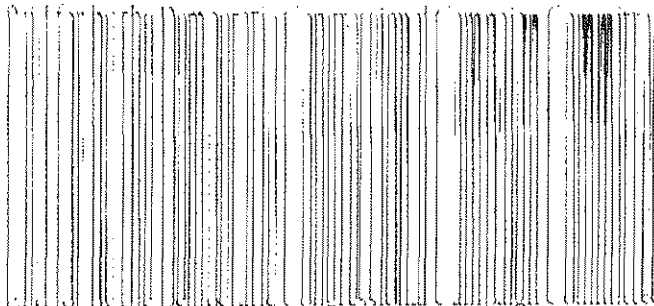
## ACTIVITIES REGISTRATION FORM

Name CORKY HALE STOLLER Guests(s) Name MIKE STOLLER  
Cell Phone 310-367-6652 Email CORKYHALE@AOL.COM

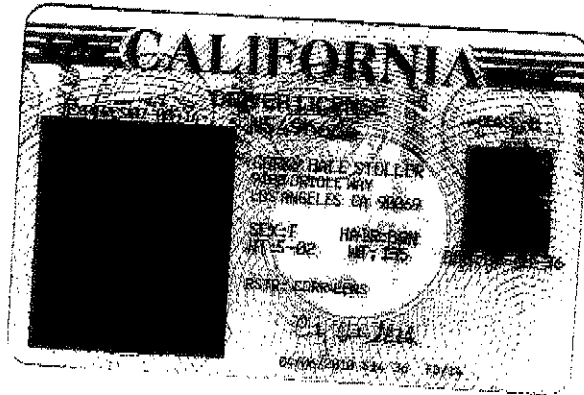
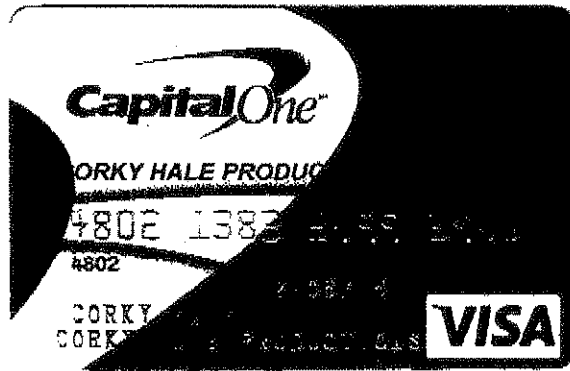
Please return by January 3, 2013 to Brittany Sherrill via fax: (202) 478-9499  
Address: DCCC, 430 South Capitol Street SE, Washington, DC 20003  
*To confirm that we received your form, please call (202) 741-1851*

### DCCC EVENTS

- Yes, I will attend the Sunday, January 20, 2013  
DCCC Concert and Luncheon  
12:30pm  
\*Space is limited  
2 Number attending & names CORKY HALE STOLLER/MIKE STOLLER
  
- Yes, I will attend the Monday, January 21, 2013  
Swearing in of President Barack Obama  
\*Space is limited - 2 tickets maximum. Additional requests will be accommodated subject to availability  
2 Number attending & names CORKY HALE STOLLER/MIKE STOLLER



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CORKY MAIL

