

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 G B DM 5 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Name of City Agency, Department, Committee	Council File No., Agenda	Item, or Case No.
Do you wish to provide general pu	iblic comment, or to speak for or against a prop	oosal on the agenda? () Fo	or proposal
Name: G6N	GRAL JEH		gainst proposal eneral comments
Business or Organization Affiliation	ISSUES AND SOL	MOM	
Address: 1626 P. W	ILCOX AUG 4924 HOLI	4000) (A. 90	8600
Business phone: 333 44 5	Representing: South C	GARAL LOS Ar	veres beenen
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:	3
Client Name:		Phone #:	ANALOGICA SETON AND AND AND AND AND AND AND AND AND AN
Client Address:			
Street	City	State Zip)

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 \$16/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the			
	Name of City Agency, Department, Committee	or Council	
Do you wish to provide general p	public comment, or to speak for or against a propo	osal on the agenda?	Against proposal
Name:	Inomas		() General comments
Business or Organization Affiliation	on:		
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BELO	w:
Client Name:		Pr	none #:
Client Address:			
Street	City	State	Zip

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 June 1/2015 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. C'Ay Council	Council File No., Agenda Item, or Case No.
Name: Pete U	Name of City Agency, Department, Committee of Sublic comment, or to speak for or against a proportion:	sal on the agenda? () For proposal () Against proposal () General comments
Address:Street	City	State Zip
	Representing:	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip
Sileet	City	State Zip

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 Wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	or Council
Do you wish to provide general put Name: Business or Organization Affiliation	ublic comment, or to speak for or against a propo	osal on the agenda? () For proposal () Against proposal () General comments
Address:Street		0.4.
	City Representing:	State Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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 U U S wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Name of City Agency, Department, Committee on	item south C	o., Agenda Item, or Case No.
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 Business or Organization Affiliation:			
Address:Street	City	State	Zip
	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BEL	ow:
Client Name:			Phone #:
Client Address:Street	City	State	Zip

CITY	OF LOS ANGELES SPEAK	ER CARD
NOTE: THIS IS A PU YOU ARE NOT REQU EXCEPT TO THE EXTI	IBLIC DOCUMENT SUBJECT TO POSTING JIRED TO PROVIDE PERSONAL INFORMA ENT NECESSARY FOR THE PRESIDING O	ON THE CITY'S WEBSITE. ATION IN ORDER TO SPEAK, OFFICER TO CALL UPON YOU
I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Ilem, or Case No.
Name	of City Agency, Department, Committee	e or Council
Do you wish to provide general public co	omment, or to speak for or against a pro	
Name: Business or Organization Affiliation:	PMA	() Against proposal () General comments
Address:Street	City	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT	NFORMATION BELOW:
Client Name:	Shut up	Phone #:
Client Address:Street	City	State Zip