CITY OF LOS ANGELES SPEAKER CARD

06-1432

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 Date Date Date Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED Name of City Agency, Department, Comm	MCi) #3
Do you wish to provide general	public comment, or to speak for or against a	proposal on the agenda? () For proposal
10h	IN WALSH	(() Against proposal () General comments
Name:	1	() General comments
Business or Organization Affiliati	ion:	
Address: Street	·/	
Street	City	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIEN	T INFORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	Citv	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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Date 10-27	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	, Agenda Item, or Case No.
I wish to speak before the		0	
	Name of City Agency, Department, Committee	or Council	
1 1	public comment, or to speak for or against a prop	osal on the agenda	For proposal () Against proposal () General comments
Name:	1 TLO OVALIT		() General comments
Business or Organization Affiliat Address:	tion:		
Street	City	State	Zip
	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INI	FORMATION BELO	w:
Client Name:		PI	none #:
Client Address:			
Street	City	State	Zip

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I wish to speak before the	Name of City Agency, Department, Committee	or Council				
Do you wish to provide general position Affiliation	public comment, or to speak for or against a prop	/	() For proposal Against proposal () General comments			
Address:Street	City	State	Zip			
Business phone:	Representing:					
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:						
Client Name:		Ph	one #:			
Client Address:	City	State	Zip			

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