		<i>y</i>
Date 10/27/09	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Acts Panes L	Freat House
	ne of City Agenoy, Department, Committe comment, or to speak for or against a pro	
Name: VCPSC	FRANÇO	Against proposal () General comments
Business or Organization Affiliation:	EK & EK	
Address: 6/0 S. M	MAIN ST. PH112	LA CA 900/4
Street Business phone 2/3/7/635E	Representing: City CIGAR	PIGHTS OF ANDREA
CHECK HERE IF YOU ARE A PAIL	SPEAKER AND PROVIDE CLIENT I	NFORMATION 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.

Date 0/27/05	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	ANTS/PAKKS me of City Agency, Department, Committee	e or Council
	comment, or to speak for or against a prop	
Name: SMAV BC		Against proposal () General comments
Business or Organization Affiliation:	CLEAR RIGHTS OF	AMERICA
Address: 5105 E. Co	s Angeles Simi Un	14 CA 93063
Street Business phone 8/8) 51/-153	S Angeles Simi Un City S Representing: TNOUSTN	State Zip
	ID SPEAKER AND PROVIDE CLIENT IN	<u> </u>
Client Name:		Phone #:
Client Address:	<u> </u>	A
Street	City	State Zip

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

Date / 27/	109		NCIL'S RULES OF L BE ENFORCED	-	noll File No., 08 –	Agenda Item, or Case No.
I wish to speak be	efore the	PHA (Name of City Agency,	Department, Com	mittee or Council		
Do you wish to pr	ovide general pu	ublic comment, or to sp	eak for or against a	a proposal on the	agenda?	For proposal () Against proposal
Name: 57	EVEN	GALLEGO	25			() General comments
		n: Coalition f		cco Free	6A	County
Address:		<i>U</i>				
Business phone:	Street 2 <mark>3/268-21</mark>	Representin	City g:	S	tate	Zip
	į	PAID SPEAKER AND			N BELO	w:
Client Name:				<u></u>	P	hone #:
Client Address:	Street		City	S	tate	Zip
	000		٠,	•		

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

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Date 10/27/07	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., A	genda Item, or Case No.
I wish to speak before the	PHA		
Nan	ne of City Agency, Department, Committee o	r Council	
	comment, or to speak for or against a propos	sal on the agenda?	(2) For proposal () Against proposal
Name: ERIC R	Detect		() General comments
Business or Organization Affiliation:		etas	50C
Address:Street			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A PAIL	D SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELOW	1 .
Client Name:		Pho	one #:
Client Address:		State	7!_
Street	City	Siale	Zip

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Cr	TY OF LOS ANGELES SPEA	KER CARD	/ /
Date 10/27/9	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or	Case No.
I wish to speak before the	APHA		
N	ame of City Agency, Department, Commit	tee or Council	
Do you wish to provide general publi	ic comment, or to speak for or against a p	() Against p	
Business or Organization Affiliation:	DEADOR GOU	ent Piero	Ü
Address: 6333 W.	3/2 ST #3/C		
Business phone: 333 20	U- J. Kepraskpting:	/ State Zip	
•	AID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:	
Client Name:		Phone #:	
Client Address:	City	State Zip	
	,	,	

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

Client Address:Street	City	State Zip
Client Name:		Phone #:
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
Business phone:	Representing:	
Address:Street	City City	State Zip
Business or Organization Affilia	essex ation: Acounty Dept of P Tobacco Contral +	Sblic Health
Name: MONTY M	essel	() Against proposal () General comments
Do you wish to provide general	public comment, or to speak for or against a propo	sal on the agenda? () For proposal
	Name of City Agency, Department, Committee	or Council
I wish to speak before the	APHA	
Date 10/27/09	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.

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

	CITY OF LOS ANGELES SPEAKE	H CAHD		
Date 10-27-09	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File	Nó., Agenda Item, or Case No.	
wish to speak before the	AV13, Panks, Heath and Ag Name of City Agency, Department, Committee	jng Comm	rittee	
	Name of City Agency, Department, Committee public comment, or to speak for or against a prop		/ /	
Name: Alisha lopez			() Against proposal () General comments	
۱ Business or Organization Affiliat	ion: Valley Community Clinic -	- Tobacco Pr	evention Program	<u> </u>
Address: 6401 Cold Wa	tion: Valley Community Clinic - Aer Canyon Are No Hollywood	State	91605	_
Business phone: (3/4)361-	63 Representing:	Olate	Σιμ	-
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BI	ELOW:	
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.

Date 10/17/09	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, Comm	ittee or Council
Do you wish to provide general	public comment, or to speak for or against a	
Name: Jahia Ch	0W	() Against proposal () General comments
	tion: American Criticar Society	
Address: 3333 Wils	Thire B1, #900 LA	CA 90010
Street Business phone: 8(H3)4H	Shire BI, #900 VA City 1-7292 Representing: American I	State Zip Cancer Society
•	A PAID SPEAKER AND PROVIDE CLIENT	<i>[</i>
Client Name:		Phone #:
Client Address:		Δ
Street	City	State Zip

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