0901005159

## CITY OF LOS ANGELES SPEAKER CARD

Date 2 (0 / 0	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Corneil	
	Name of City Agency, Department, Committee or	r Council
Do you wish to provide general pull	blic comment, or to speak for or against a propos	( ) Against proposal
Business or Organization Affiliation	1:	
Address:Street	City	State Zip
No. of the contract of the con	Representing:	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION 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.

## CITY OF LOS ANGELES SPEAKER CARD

Date 2-10-10	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	r Council	
Do you wish to provide general	public comment, or to speak for or against a propos	al on the agenda?	( ) For proposal
Λ	NO SACAYS		Against proposal     General comments
Business or Organization Affiliat	ion:	and the second s	eron.
Address:Street		State	Zip
	Representing:		<b>Σ</b> .ΙΡ
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOV	<b>v:</b>
Client Name:		Pł	none #:
Client Address:			
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.

## CITY OF LOS ANGELES SPEAKER CARD

09.0600-5	ł	35 Cg

2/10/12		OUNCIL'S RULES O WILL BE ENFORCED	F ∤ k	o., Agenda Item, or Case No.
I wish to speak before the _	Name of City Ager	COJ UC		
Do you wish to provide gene Name:			a proposal on the agend	a? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Al	ffiliation:			
Address:				
Address: Street		City	State	Zip
Business phone:	Represe	nting:		······································
CHECK HERE IF YOU AF				ow:
Client Name:		······································		Phone #:
Client Address:	The state of the s			
Street		🐧 City 📐	State	Zip

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

## CITY OF LOS ANGELES SPEAKER CARD Date Council File No., Agenda Item, or Case No. THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. I wish to speak before the \_\_\_\_ Name of City Agency, Department, Committee or Council Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? ( ) For proposal ) Against proposal Name: MATT DOWD General comments Business or Organization Affiliation: Address: Street City State Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_ CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #:

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

State

Zip

Client Address:
Street City