

CITY OF LOS ANGELES SPEAKER CARD

04-0600-3159

Date

2-18-10

Council File No., Agenda Item, or Case No.

5

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

I wish to speak before the

City Council

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

( ) General comments

Name: Cyndi Hensch

Business or Organization Affiliation: NCLP

Address: 7343 Dunbarton Ave LA

Street

City

State

Zip

Business phone: 3107796706 Representing:

CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

Client Name:

Phone #:

Client Address:

Street

City

State

Zip

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# CITY OF LOS ANGELES SPEAKER CARD

Date

2-18-10

THE CITY COUNCIL'S RULES OF  
DECORUM WILL BE ENFORCED.

Council File No., Agenda Item, or Case No.

3

I wish to speak before the

City Council

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

( ) General comments

Name:

Cyndi Hensch

Business or Organization Affiliation:

NCWP

Address:

7343 Dunbarton Ave LA

Street

State

Zip

Business phone:

310 796 706

Representing:

CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

Client Name:

Phone #:

Client Address:

Street

City

State

Zip

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Date

2-18-10

THE CITY COUNCIL'S RULES OF  
DECORUM WILL BE ENFORCED.

Council File No., Agenda Item, or Case No.

2

I wish to speak before the City Council  
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: CYNDI HENCH ( ) General comments

Business or Organization Affiliation: NCWP

Address: 7343 Dumbarton Ave  
Street City State Zip

Business phone: 310 779 6706 Representing: \_\_\_\_\_

**CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:**

Client Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Client Address: \_\_\_\_\_  
Street City State Zip

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# CITY OF LOS ANGELES SPEAKER CARD

Date

2-18-2010

THE CITY COUNCIL'S RULES OF  
DECORUM WILL BE ENFORCED.

Council File No., Agenda Item, or Case No.

Item 5

I wish to speak before the

Council

Name of City Agency, Department, Committee or Council

for enforcement of Charter

Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? ( ) For proposal

( ) Against proposal

(x) General comments

Name:

SHARON COMMINIS

Business or Organization Affiliation:

MARVISTA COMMUNITY COUNCIL

Address:

3630 WADEST

Street

City

State

Zip

90066

Business phone:

Representing:

CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

Client Name:

Phone #:

Client Address:

Street

City

State

Zip

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**CITY OF LOS ANGELES SPEAKER CARD**

Council File No., Agenda Item, or Case No.  
*Item 2*

Date  
*2-18-2010*

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

I wish to speak before the Council  
Name of City Agency, Department, Committee or Council

*Against any Sweeps of followers*  
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

Name: SHARON COMMIUS

Business or Organization Affiliation: MAR VISTA COMMUNITY COUNCIL

Address: 3630 WADE ST Street City State Zip 90066

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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Client Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Client Address: \_\_\_\_\_ Street City State Zip

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# CITY OF LOS ANGELES SPEAKER CARD

Date

2-18-10

THE CITY COUNCIL'S RULES OF  
DECORUM WILL BE ENFORCED.

Council File No., Agenda Item, or Case No.

09-0600-5159  
ITEM # 15

I wish to speak before the

CITY COUNCIL

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

( ) General comments

Name:

DAVID LEVIN

Business or Organization Affiliation:

NEIGHBORHOOD COUNCILS

Address:

9854 MAIN

LA

CA

90032

Street

City

State

Zip

Business phone:

Representing: SELF

**CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:**

Client Name:

Phone #:

Client Address:

Street

City

State

Zip

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# CITY OF LOS ANGELES SPEAKER CARD

Date

2/18/10

THE CITY COUNCIL'S RULES OF  
DECORUM WILL BE ENFORCED.

Council File No., Agenda Item, or Case No.

5

I wish to speak before the City Council  
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  
(X) General comments

Name: Terry Ellen Robinson

Business or Organization Affiliation: Palms NC

Address: 3662 Midvale Ave Los Angeles CA 90034  
Street City State Zip

Business phone: 310.202.6430 Representing: Palms NC

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Client Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Client Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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Date

2-18-2010

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

Council File No., Agenda Item, or Case No.

Item # 2

I wish to speak before the

City Council

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

( ) General comments

Name:

Mike O'GARA

Business or Organization Affiliation:

Sun Valley Area Neighborhood Council

Address:

9301 CAYUGA AVE Sun Valley CA 91352

Street

City

State

Zip

Business phone:

818-767-6766

Representing:

Myself

CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

Client Name:

Phone #:

Client Address:

Street

City

State

Zip

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# CITY OF LOS ANGELES SPEAKER CARD

Date

2.18

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

Council File No., Agenda Item, or Case No.

7

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: \_\_\_\_\_ ( ) General comments

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

**CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:**

Client Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Client Address: \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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# CITY OF LOS ANGELES SPEAKER CARD

Date

2-18

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

Council File No., Agenda Item, or Case No.

2

I wish to speak before the

CC

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

( ) General comments

Name:

Stephen [Signature]

Business or Organization Affiliation:

Address:

Street

City

State

Zip

Business phone:

Representing:

[Signature]

**CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:**

Client Name:

Phone #:

Client Address:

Street

City

State

Zip

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# CITY OF LOS ANGELES SPEAKER CARD

Date

2-18

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

Council File No., Agenda Item, or Case No.

3

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  
( ) General comments

Name: \_\_\_\_\_

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

**CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:**

Client Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Client Address: \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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# CITY OF LOS ANGELES SPEAKER CARD

Date

2-18

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

Council File No., Agenda Item, or Case No.

4

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  
( ) General comments

Name: \_\_\_\_\_  
Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

**CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:**

Client Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Client Address: \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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# CITY OF LOS ANGELES SPEAKER CARD

1/18

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

Council File No., Agenda Item, or Case No.

5

I 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: \_\_\_\_\_ ( ) General comments

Stephen Fox

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

**CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:**

Client Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Client Address: \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Budget A

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

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Date/Time Submitted

02/18/2010 10:50 AM

Council File No., Agenda Item, or Case No.

5

I wish to speak before the \_\_\_\_\_

**Council**

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? \_\_\_\_\_

Name:

**Dr. Wiseman**

- ( ) For proposal
- ( ) Against proposal
- ( ) General comments

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

State

Zip

Business phone: \_\_\_\_\_

Representing: \_\_\_\_\_

**CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:**

Client Name: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Client Address: \_\_\_\_\_

Street

City

State

Zip