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

Date 12/8/10

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

I wish to speak before the	Bot F Cute		
•	Name of City Agency, Department, Committee	e or Council	
Do you wish to provide general pu	blic comment, or to speak for or against a pro $M = Rulston$	posal on the agenda?	( ) For proposal (文) Against proposal (文) General comments
Business or Organization Affiliation	n:		
Address:Street		•	
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT IN	IFORMATION BELO	N:
Client Name:		Pi	none #:
Client Address:	City	State	Zin

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

NOTE: THIS IS A PUBLIC DOCUMENT.

# 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 General comments Business or Organization Affiliation: Area / Kepresantulve Enciro Business phone: 818-453-3407 Representing: Email: Glenn Bailey SFV & Yahoo CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

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NOTE: THIS IS A PUBLIC DOCUMENT.

City

Phone #:

Zip

State

Client Name:

Client Address:

09-115-54

Date 12-8-10	THE CITY COUNCIL'S RULE DECORUM WILL BE ENFOR	SOF	ouncil File No., Agenda Item, or Ca	se No.	
I wish to speak before theName	of City Agency, Department,	Committee or Counc	cil		
Do you wish to provide general public co	omment, or to speak for or aga	inst a proposal on tl			
Name: Jeff Javo	oberaic		( ) Against prop ( ) General cor		
Business or Organization Affiliation:	Mid City West	Community	Cound	****	
Address: 543 N Fairf	K A/ City	<u>A CA</u>	State Zip	····	
Business phone: 373-646.330	•				
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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09-1115-54

Date	THE CITY COUNCIL'S F	ULES OF	Council File No., Age	nda Item, or Case No.
Jwish to speak before the	Education &	Neighbo	orhoods	A A A A A A A A A A A A A A A A A A A
Do you wish to provide general t	Name of City Agency, Departmoublic comment, or to speak for o			) For proposal
4	Epperhant	ugunot a proposar or	( ( ( /	) Against proposal ) General comments
Business or Organization Affiliat	ion: <u>Coastal</u> So	in Pedro	NC	
Address: 7/200 W	36+ 3744 9t City	Sur Pede	State	9073/ Zip
Business phone:	Nepresenting:			
Will a straight of the	A PAID SPEAKER AND PROVID	DE CLIENT INFORMA		***
Client Name: (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)			Phone	<b>∃ #:</b>
Street	City	N. S.	State	Zip

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

NOTE: THIS IS A PUBLIC DOCUMENT.

Date /2 - 8 - 1 O	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.			
I wish to speak before the	Aucation of Neigh Name of City Agency, Department, Comm	borhoods Committee		
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? ( ) For proposal				
Name: Glenn	Bailey	( ) Against proposal ( ) General comments		
Business or Organization Affiliation: Area 1 Representative, Encino Neighborhood Council				
Address: PD Box /	9/72 Encino	CA 91416		
Business phone: 218-453	3407 Representing: Goall: G/	enn Bailey SFV a yahoo com		
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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