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#### 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	THE CITY COUNCIL'S RULES OF	Council File No., Age	nda Item, or Case No.
29 558 [2]	DECORUM WILL BE ENFORCED.	- 14	
I wish to speak before the	COUNCIL	······································	
Name of City Agency, Department, Committee or Council			
Do you wish to provide general publi	ic comment, or to speak for or against a propose		) For proposal ) Against proposal
Name:	Dr. Tom Wil	Atoms "	) General comments
		NELA Coalo	fion
Address:		900	132-112
Address:Street	City	P State AAI	Zip
Business phone:	Representing:	Brd MGr	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:			
Client Name:		Phone	ə #:
Client Address:			
Street	City	State	Zip
Please see reverse of card for in	portant information and submit this entire card	to the presiding office	r or chairperson

YOU ARE NOT REQ	UBLIC DOCUMENT SUBJECT TO POSTING O UIRED TO PROVIDE PERSONAL INFORMATION FENT NECESSARY FOR THE PRESIDING OFF	ON IN ORDER TO SP	PEAK,
Date 2412	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	
I wish to speak before the	Comul		
Nam	e of City Agency, Department, Committee o	or Council	
Do you wish to provide general public o	pomment, or to speak for or against a propo	sal on the agenda?	( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliation:		· · · · · · · · · · · · · · · · · · ·	
Address:Street	City	State	Zip
	Representing:		
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INF	ORMATION BELO	
		FI	IUITE #
Client Address:Street	City	State	Zip
Please see reverse of card for impo	ortant information and submit this entire care	d to the presiding of	fficer or chairperson.

#### 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 Council File No., Agenda Item, or Case No. THE CITY COUNCIL'S RULES OF 2.29.17 **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 Name: 1 \_\_\_\_\_ 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 #: \_\_\_\_\_ City Client Address: Street State Zip

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

Date 2/16/17		Council File No., Agenda Item, or Case No.
I wish to speak before theNan	16 ne of City Agency, Department, Committe	ee or Council
	comment, or to speak for or against a pr	
Business or Organization Affiliation:		
Address:Street	City	State Zip
	Representing:	– · · <b>,</b> "
CHECK HERE IF YOU ARE A PAIL	SPEAKER AND PROVIDE CLIENT	NFORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip
Please see reverse of card for imp	ortant information and submit this entire	card to the presiding officer or chairperson.

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	CITY	OF LOS ANGEL	ES SPEAKER	CARD	· ·	
Date				Council File N	o., Agenda Item, or	Case No.
I wish to speak before the _	:	16				۰ 
	Nam	e of City Agency, Departn	nent, Committee or	Council		
Do you wish to provide gen Name: <u>MICHA</u> Business or Organization A	EL	CMARC		·	a? ( ) For propo ( ) Against p ( ) General	oroposal
Address:Street		City	······	State	Zip	······································
Business phone:		-		•		
CHECK HERE IF YOU A	RE A PAID	SPEAKER AND PROV		RMATION BEL	. <b>OW:</b>	
Client Address:				·····		
	OVT	City	1 C 2 2	State	Zip	
X		rtant information and sub		to the presiding	officer or chain	<u>oerson.</u>
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YOU ARE NOT R	A PUBLIC DOCUMENT SUBJECT TO POSTING REQUIRED TO PROVIDE PERSONAL INFORMA EXTENT NECESSARY FOR THE PRESIDING O	TION IN ORDER TO SPE	AK,
Date MR	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	lame of City Agency, Department, Committee	or Coupoil	
	lic comment, or to speak for or against a prop MA $M$ $M$		) For proposal ) Against proposal ) General comments
Address:Street			
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CHECK HERE IF YOU ARE A PA	AID SPEAKER AND PROVIDE CLIENT IN	IFORMATION BELOW	·
Client Name:		Pho	ne #:
Client Address:Street	City	State	Zip

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