	CITY OF LOS ANGELES	S SPEAKEF	ARD	09-2895			
Date 3-9-2011	THE CITY COUNCIL'S RUDECORUM WILL BE ENF		Council File	No., Agenda Item, or Case No.			
wish to speak before the	TRANSPORTATION	Comm,	776E /	<u> </u>			
Do you wish to provide general	Name of City Agency, Departme public comment, or to speak for or			da? ( For proposal			
Name: JAY JA	ATER			( ) Against proposal ( ) General commen	ts		
Business or Organization Affiliation: L. A. Bicycle ADVISING COMMITTEE							
Address:	rolly Gen Blis	0, / /		90025			
Street City State Zip  Business phone: 310-411-6888 Representing: LABAC							
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION 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.

NOTE: THIS IS A PUBLIC DOCUMENT.

/ 0	CIT' OF LOS	ANGELES SPEA	KEF ARD	
Date 3/9///		DUNCIL'S RULES OF VILL BE ENFORCED.	Council File N	No., Agenda Item, or Case No.
wish to speak before the	PAUS	PORTATI	In Com	
Do you wish to provide genera		cy, Department, Confmit		( ) Against proposal
Name:		/ #	UPK UP	( ) General comments
Street	MIRE BC#K	Cify	State	900/1 Zip
Business phone: 43 623	7575 Represent	ting: SELF		
CHECK HERE IF YOU ARE	A PAID SPEAKER AI	ND PROVIDE CLIENT	INFORMATION BEL	<u> </u>
Client Name:			NV,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	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.

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## CIT' OF LOS ANGELES SPEAKEF CARD

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.					
I wish to speak before the	(M) Het					
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: Jeff Jacobberger	General comments					
Business or Organization Affiliation:	n (Dunuetter					
Address: 5516 Edglwood Pl 4/1 /A	'CA 90019					
Street City  Business phone: 373.646.3308 Representing.	Sfate Zip -					
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:						
Client Name:	Phone #:					
Client Address:	State 7in					

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

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