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 DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. # 23
I wish to speak before the	A City Council  Name of City Agency, Department, Committee	10-1797-5/5 ee or Council
Do you wish to provide general p	public comment, or to speak for or against a pro	oposal on the agenda? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliati	on: Dignity Health & CA	Hospital Medical Center Thridge Hospital Med Car
Address: $2000000000000000000000000000000000000$	to Ave Suite 800 Pasadene City CA 9112 2209 Representing: Dignity Hec	) State Zip
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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., Agenda Item, or Case No.
Spril 24, 2013	DECORUM WILL BE ENFORCED.	Agenda Vien 23 File No. 10-1797-815
I wish to speak before the	City Counal	File No. 10-1797-815
•	Name of City Agency, Department, Committee o	r Council
Do you wish to provide general p	oublic comment, or to speak for or against a propose	sal on the agenda? ( ) For proposal (×) Against proposal ( ) General comments
Business or Organization Affiliati	on: 0/ mpia Medical	Center
Address:	on: Olympia Medical 1 5900 W. Olympia Blv	d Los Byeles 90036
Business phone: $323-932$	- 5970 Representing: Olympia Mill	cal Center
	A PAID SPEAKER AND PROVIDE CLIENT INFO	
Client Name:		Phone #:
Client Address:	City	State Zip

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

	,		· · · · - <del>-</del>
Date 4/24//2	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	o., Agenda Item, or Case No.
I wish to speak before the	Courte		
Nan	ne of City Agency, Department, Committee or	Council	
Do you wish to provide general public of Name: SSICA JUBO, Business or Organization Affiliation:		al on the agend	a? ( ) For proposal  ( ) Against proposal  General comments
		$O_{\Lambda}$	0,-14
Address: 350 S. Bixes	2 2	State	90017
Business phone: 2/3-580-7558		State	ZIP
CHECK HERE IF YOU ARE A PAIC	SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	.ow:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip



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 O	'# i	o., Agenda Item, or Case No.
4/24/13	DECORUM WILL BE ENFORCE	). Iden#23/	CF * 10-1797-\$
I wish to speak before the	Name of City Agency, Department, Com	mittee or Council	
Do you wish to provide genera	I public comment, or to speak for or against	a proposal on the agenda	? ( ) For proposal
Name: Yeahia Ke	shishian		(X) Against proposal ( ) General comments
Business or Organization Affilia	shishian ation: Central City Assoc	iation	Annual Control of the
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIER	NT INFORMATION BELO	ow:
Client Name:		F	Phone #:
Client Address:			
Street	City	State	Zip

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 4 13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	io., Agenda Item, or Case No.
I wish to speak before the	os Angeles City Couna	<u> </u>	
	Name of Oity Agency, Department, Committee or	Council	
Do you wish to provide general p	oublic comment, or to speak for or against a proposa	al on the agend	a?()For proposal ()Against proposal ()General comments
·	on: Motion Picture Associat	tion of	America
Address: 15301 Ven	tra Blud. Sherman Oak	S CAU	91403
Business phone: \$\frac{\sqrt{3}\triangle{3}}{\sqrt{3}}\triangle{6}		State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	.ow:
Client Name:			Phone #:
Client Address:	City	Ctoto	7100
Street	City	State	Zip

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

	works was		
Date	THE CITY COUNCIL'S RULES OF	Council File No	., Agenda Item, or Case No.
4-2-4-13	DECORUM WILL BE ENFORCED	. 1	-3
I wish to speak before the	Comar	L.	
•	Name of City Agency, Department, Comr	nittee or Council	
Do you wish to provide genera	I public comment, or to speak for or against a		? ( ) For proposal ( ) Against proposal ( ) General comments
Name: T(COO)	OHENES		· ( ) General comments
Business or Organization Affilia	ation:	-	
Address:	City City		
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIEN	IT INFORMATION BELO	ow:
Client Name:		·	hone #:
Client Address:			
Street	City	State	Zip

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

EXCEPT TO THE	EXIENT NECESSARY FOR THE PRESIDING OF	FICEN TO CALL OFON TOO
Date 24 2013	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the		
l	Name of City Agency, Department, Committee	or Council
5000	olic comment, or to speak for or against a propo	( ) Against proposal ( ) General comments
Business or Organization Anniation	6. M/10- 5 F	Chic allon
Address: Street	LAVERL C	and the distance of the distan
Business phone:	Representing:	
CHECK HERE IF YOU ARE A F	PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BELOW:
Client Name:		Phone #:
Client Address:	= h ( LLY W OO	State Zhp ( )
mi	the mouth of the formation and authoritable antico and	und to the munciplies office and about record

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

EXCEPTION	HE EXICAT NECESSART FOR	THE PRESIDING OFFIC	EN TO CALL OFON	100
Date 4-24-13	THE CITY COUNCI DECORUM WILL B		Council File No., A	genda Item, or Case No.
I wish to speak before the	City Cource	14		
	Name of City Agency, Dep	artment, Committee or	Council	
Do you wish to provide general powers. DR. E. WAY	UC GHEDOIS		(	) For proposal  ) Against proposal  ) General comments
Business or Organization Affiliation	on: GREATER TE	ve Light m?	<u>c</u>	
Address: 1276 W.	19th STREET	1 A	CA	90007
Business or Organization Affiliation Address: 1276 w. Street 767.	-4/02 Representing:	Churchy	State	Zip
CHECK HERE IF YOU ARE A				<b>[</b>
Client Name:			Pho	ne #:
Client Address:		Dity	State	Zip

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 4/24/13	THE CITY COUNCE DECORUM WILL		Council File No	D., Agenda Item, or Case No.
I wish to speak before the	Council			
	Name of City Agency, De	partment, Committee	or Council	
Do you wish to provide general p				a? ( ) For proposal ( ) Against proposal ( X General comments
Business or Organization Affiliation	on: VICA		***************************************	
Address: 5161 V		Ste. 208	LA, CA	91403
Business phone: 718 817				
CHECK HERE IF YOU ARE A	PAID SPEAKER AND P	ROVIDE CLIENT IN	FORMATION BEL	ow:
Client Name:				Phone #:
Client Address:		City	State	7in

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 4/21//3	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	OUNCIL	
	Name of City Agency, Department, Committee	or Council
Name: KEV. BOK	ublic comment, or to speak for or against a propo	osal on the agenda? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliation	n: CHURCH	
	FORD BUE. L.D. (	100.5 6 State 7in
Business phone: (3/0)874/5	335 Representing: CHURCUS	5
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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 CO	UNCIL'S RULES OF	Council File	No., Agenda Item, or Case No.
4-21-13	DECORUM W	ILL BE ENFORCED.	. 10	1-1797-515
I wish to speak before the	Council		······································	23
	Name of City Agency	, Department, Comm	nittee or Council	
Do you wish to provide general p	oublic comment, or to s	peak for or against a	proposal on the agen	ida? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliati		Alliance	Medical	Conter
Address: 531 W. Street	College St	Los Ang	eles CA	90012
Street  Business phone: 213-437				
CHECK HERE IF YOU ARE A				
Client Name:				Phone #:
Client Address:	***************************************	City	State	Zip

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 4-24-2019	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	o., Agenda Item, or Case No.
wish to speak before the	City Cancil		
	Name of City Agency, Department, Committee or		2 <sup>1</sup> / \ Fan anamas
	public comment, or to speak for or against a propos	al on the agenda	a?()For proposal
Name: Hill ary	Mordon		( ) Against proposal     ( ) General comments
Business or Organization Affiliation	on: ) iessa Club	***************************************	
Address:	Cib.	Chata	7:
Business phone:	Representing: DUA	State 1	Sy CAA
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	ow:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

73

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 4/24/13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Cas	зе No.
I wish to speak before the	City Commail			
	Name of City/Agency, Department, Committee	or Council	,	
15/10 V	public comment, or to speak for or against a prop NNT tion: <u>A Collaborative</u> A		( ) Against prop	osai
Address:			0	1081 LE
Street	City	State	Zip	
Business phone:	Representing:			
	A PAID SPEAKER AND PROVIDE CLIENT IN		<b>W:</b>	
Client Address:	Olt.	Ct-t-	**************************************	
Street	City	State	Zip	

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 4-24-7013	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the		
Nar	ne of City Agency, Department, Committee or	Council
	comment, or to speak for or against a proposa	I on the agenda? ( ) For proposal ( ) Against proposal
Name: LESUE VANKEUREN (	AMPBELL	( ) General comments
Business or Organization Affiliation: $\underline{S}$		
Address: 4310 FNLEY AVE #	7 US ANGELES	CA 90027
	City  Representing: SEVF - DON'T W	State Zip WSTE LA MORLITION
	O SPEAKER AND PROVIDE CLIENT INFOR	
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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

	The bottom of the comment of the stime of	LOIDING OFFICER TO OALL	01 011 100
Date 4-2013	THE CITY COUNCIL'S RUL DECORUM WILL BE ENFO		e No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department,	Committee or Council	
Do you wish to provide general p	oublic comment, or to speak for or ag	•	nda? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliation	The Contains		mic Scrivel
Address:Street	City	State	Zip
Business phone:	~	uus / coal	wich of Congres
•	A PAID SPEAKER AND PROVIDE	CLIENT INFORMATION B	ELOW:
		***************************************	_ Phone #:
Client Address:Street	City	State	Zip

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., Agenda Item, or Case No.
4-24-13	DECORUM WILL BE ENFORCED.	10-1797-515
I wish to speak before the	City Courcil	
	Name of City Agency, Department, Committee of	or Council
1	public comment, or to speak for or against a propo	( ) Against proposal
Name: JOY KN	ion: Eupewerment (ouguess Sarthwest	
Business or Organization Affiliati	ion: Eugenvernent Conquess Southwest	Anea Neighborhood Deulpt.
Address:	•	Corner
Street  Business phone: 333-5	947-143 Representing: Self/EC	State Zip SWAN DC
	A PAID SPEAKER AND PROVIDE CLIENT INF	
Client Name:		Phone #:
Client Address:		
Street	City	State Zin

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 COUN	CIL'S RULES OF	Council File No.,	Agenda Item, or Case No.
4-24-13	DECORUM WILL		10-17	97-S15
I wish to speak before the	City Cou	mail		
	Name of City Agency, De	epartment, Committee o	r Council	
Do you wish to provide general	public comment, or to spea	k for or against a propos	sal on the agenda?	(X) For proposal
Name: Rev	William S	mart		Against proposal     General comments
Business or Organization Affiliat  Address: Street	ion: <u>Southern</u>	Christian	Leadersh	ip Council
Address:	F Southern	Californ	ia	
Street		City	State	Zip
Business phone:				
CHECK HERE IF YOU ARE	,		RMATION BELO	w:
Client Name:			Pr	none #:
Client Address:		City	State	7:
211441	•	₩ĸy	State	Zip



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., Agenda Item, or Case No.		
4-24-13	DECORUM WILL BE ENFORCED.	10-1797-515		
I wish to speak before the	City Council			
	Name of City Agency, Department, Committee or C	Council		
Do you wish to provide general p	oublic comment, or to speak for or against a proposa	on the agenda? UFor proposal		
Varila	a4400C	( ) Against proposal ( ) General comments		
Name:C	1000p0 5	( ) deneral comments		
Business or Organization Affiliati	con: Was le WO Va			
A -1-1				
Business phone:	Representing: City DWW [	State Zip Zip WAY		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:		Phone #:		
Client Address:				
Street	City	State Zip		

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., Agenda Item, or Case No.
4-24-13	DECORUM WILL BE ENFORCED.	10-1797-515
I wish to speak before the	City (our al	
	Name of City Agency, Department, Commi	ttee or Council
Do you wish to provide general p	oublic comment, or to speak for or against a	proposal on the agenda? (X) For proposal
Name: Rabbi Jo	mathan Klein	( ) Against proposal ( ) General comments
Business or Organization Affiliati	on: Cleray & Laity	Juited for
Address: ELOV	ouric Justice	(CLUE)
Street	City	Štate Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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 4-24-13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. 10-1797-515
I wish to speak before the	city Courail	
	Name of City/Agency, Department, Committee	ee or Council
Name: Jim Sun		oposal on the agenda? (X) For proposal  ( ) Against proposal  ( ) General comments
Business or Organization Affiliati	ion: Teamsters 396	
Address:Street		
Business phone:	147 AUAepresenting: DWLA	Lexal 390 Zip
	A PAID SPEAKER AND PROVIDE CLIENT I	
Client Name:		Phone #:
Client Address:	City	State Zip

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., Agenda Item, or Case No.
4-24-2013	DECORUM WILL BE ENFORCED.	10-1797-515
I wish to speak before the	City Corners	
	e of City Agency, Department, Committee	or Council
Do you wish to provide general public co	omment, or to speak for or against a prop	oosal on the agenda? ( ) For proposal ( ) Against proposal
Name: <u>Oreg Good</u>	1	( ) General comments
Business or Organization Affiliation:	LAANE	
Address: 466 Lucas V	Ave. UA	CA 900/7
Street Street		LAAN E Zip
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State 7in

#### CIT, OF LOS ANGELES SPEAKEL CARD

CT	$I \subset$
Samuel S.	- B

Date			Council File	No., Agenda Item, or Case No.
. I wish to speak before the		Color	C. Harris	and the second s
Do you wish to provide general	Name of City Agency, Depa	and the same of th		do2 /sd Ear proposal
Do you wish to provide general Name:				( ) Against proposal ( ) General comments
Business or Organization Affilia	A STATE OF THE STA	·		
Address: Street		tv	State	Zip
Business phone:		•		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PRO	VIDE CLIENT INFO	RMATION BE	Low:
Client Name:				Phone #:
Client Address:				
Street	Ci	у	State	Zip .