CITY OF LOS ANGELES SPEAKER CARD

| YOU ARE NO | IS A PUBLIC DOCUMENT SUBJECT TO PO T REQUIRED TO PROVIDE PERSONAL INF IE EXTENT NECESSARY FOR THE PRESID | ORMATION IN ORDER TO S | PEAK, |
|----------------------------------|--|-------------------------------|---|
| Date (1-20-2012 | THE CITY COUNCIL'S RULES O DECORUM WILL BE ENFORCE | // | , Agenda Item, or Case No. |
| I wish to speak before the | ENC Name of City Agency, Department, Com | Imittee or Council | 10-1797-57 |
| Do you wish to provide general p | ublic comment, or to speak for or against | a proposal on the agenda' | ?()For proposal |
| Name: ALISA | | | Against proposalGeneral comments |
| | n: 12A - DONE | · | |
| Address: <u>3701</u> | CAZADOR ST | LACA | 90065 |
| | Representing: | Siale | |
| CHECK HERE IF YOU ARE A | PAID SPEAKER AND PROVIDE CLIE | NT INFORMATION BELC | ow: |
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| | or important information and submit this er | ntire card to the presiding o | |

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|--------------------------------------|--|--------------------|----------------------------------|-------|
| Date 11/20/12 | THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. | Council File No. | , Agenda Item, or Cas | e No. |
| I wish to speak before the | Name of City Agency, Department, Committee or | CF | - 10-179 | 7-59 |
| Do you wish to provide general Name: | public comment, or to speak for or against a propos | al on the agenda' | Against prop | osal |
| | tion: | | | |
| Address:Street | City | State | Zip | |
| | Representing: | | • | |
| CHECK HERE IF YOU ARE | A PAID SPEAKER AND PROVIDE CLIENT INFO | RMATION BELC | w: | |
| Client Name: | | P | hone #: | |
| Client Address:Street | City | State | Zip | |
| Please see reverse of card | for important information and submit this entire card | to the presiding c | fficer or chairpers | son. |

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|---|---|----------------------------|---|--|--|--|--|
| Date 1 - 20 - 12 I wish to speak before the | THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Education and Nergh | # 9 horhouts | ., Agenda Item, or Case No. CF 10 - 1797-5 | | | | |
| 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 Name: General comments Wame: General comments Business or Organization Affiliation: General comments | | | | | | | |
| Address: | City | State | Zip | | | | |
| Business phone: | Representing: | | · | | | | |
| CHECK HERE IF YOU ARE | A PAID SPEAKER AND PROVIDE CLIENT | INFORMATION BELO | SW: | | | | |
| Client Name: | | F | 'hone #: | | | | |
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| Please see reverse of card f | for important information and submit this entire | e card to the presiding of | officer or chairperson. | | | | |