| Date/Time Submitted 09/06/2011 10:05 AM | CITY OF LOS ANGELES SPI | EAKER CARD | Van Nuys |
|---|--|---|--|
| I wish to speak before the | Сог | ıncil | |
| | Name of City Agency, Depar | tment, Committee or Council | |
| Do you wish to provide general Name: | public comment, or to speak for or agains Mariam Fogler | t a proposal on the agenda? | Adainst proposal |
| Business or Organization Affilia | | 2011-11-11-11-11-11-11-11-11-11-11-11-11- | |
| | City | | Zip |
| | Representing: | | |
| CHECK HERE IF YOU ARE A I | PAID SPEAKER AND PROVIDE CLIENT | INFORMATION BELOW: | |
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CITY OF LOS ANGELES SPEAKER CARD

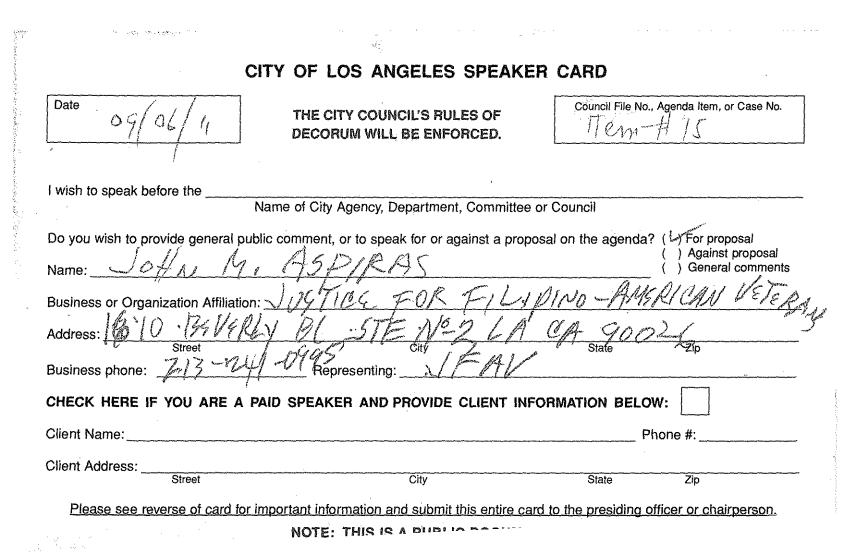
Van Nuys

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| Date/Time Submitted 09/06/2011 10:06 AM | Council File No., Agenda Item, or Case No. 15 |
|---|--|
| I wish to speak before the | Council |
| | Name of City Agency, Department, Committee or Council or to speak for or against a proposal on the agenda? () For proposal () Against proposal () General comments |
| Business or Organization Affiliation: | |
| Address: | · |
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| CHECK HERE IF YOU ARE A PAID SPEAKER A | AND PROVIDE CLIENT INFORMATION BELOW: |
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| Date 09/04/11 | | DUNCIL'S RULE VILL BE ENFOR | | | ., Agenda Item, or 1 井 I ら | Case No. |
| I wish to speak before the | S Angeles (Name of City Agend | TH (600 cy, Department, 0 | Committee or Co | ouncil | | |
| Do you wish to provide general pl | | speak for or aga | inst a proposal c | on the agenda | ? (V) For propo | sal |
| Name: Maurus bumal | d0q | | | | ()Against p ()General c - | |
| Business or Organization Affiliatio | n: SIPA 1 | Grad Str | dent | | | |
| Address: OOQ | ove thall | LUS Amage | eter, CA | 9000 | 15 | |
| Street | | City | | State | Zip | / |
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| CHECK HERE IF YOU ARE A | PAID SPEAKER A | ND PROVIDE C | LIENT INFORM | ATION BELC | w: | |
| Client Name: | | | | F | hone #: | |
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| Please see reverse of card fo | important informatio | on and submit th | is entire card to | the presiding of | officer or chairp | erson. |
| | NOTE: THIS | IS A DIIDIIA | | | | |



| | CITY OF LOS ANGELES SPEAKE | |
|----------------------------------|--|--|
| Date 09/06/11 | THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. | Council File No., Agenda Item, or Case No. Hem # 13 |
| I wish to speak before the | City Counal | |
| : | Name of City Agency, Department, Committee | or Council |
| Do you wish to provide genera | I public comment, or to speak for or against a prop | osal on the agenda? () For proposal |
| Name: <u>ARTURO</u> | P. GARCIA | () Against proposal |
| Business or Organization Affilia | ation: JUSTICE FOR FILIPINO | AMERICAN VETERAN |
| Address: 1610 B | evenly Blud. Surle No. 2, City | 4, GA 90026 |
| Street Business phone: 213-24 | LI0995 Representing: <u>FAV</u> | State Zip |
| | A PAID SPEAKER AND PROVIDE CLIENT IN | FORMATION BELOW: |
| Client Name: | | Phone #: |
| Client Address: | | |
| Street | City | State Zip |

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CITY OF LOS ANGELES SPEAKER CARD

Date 9106

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

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

| I wish to speak before the | Council | | |
|---|---|---------------------------|--|
| Name | of City Agency, Department, Commit | ttee or Council | |
| Do you wish to provide general public co Name: / A C / C | | proposal on the agenda? (| For proposal Against proposal General comments |
| Business or Organization Affiliation: | of commander | , society of (| Juerrilla + |
| Address: 201 Sc. Lafee | St., # P1-103 LAT A | i ater - | fcout |
| Business phone: $(2/3)38(-774)$ | City <u>Representing: LAT</u> | State | Zip 40057 |
| CHECK HERE IF YOU ARE A PAID | SPEAKER AND PROVIDE CLIENT | INFORMATION BELOW | : he |
| Client Name: | | Pho | one #: |
| Client Address: | City | State | 712 |
| | tant information and submit this entire | | Zip <u>cer or chairperson</u> |

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CITY OF LOS ANGELES SPEAKER CARD

| DateTHE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.Council File No., Agenda Item, or Case N Tem # 15Council File No., Agenda Item, or Case N Tem # 15 | 0. |
|--|-------|
| I wish to speak before the <u>CITY COUNCI</u> 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: Dr. Jay L. Valencia () Against proposa () General comme | |
| Business or Organization Affiliation: Coaliston or FIL-AM Unprefing flen Hucarab | Noge. |
| Address: Jollo Hub St. CA. Good2 | |
| Address: <u>Street</u> Street Business phone: 213-435-704 Representing: <u>Condition</u> of Fil-AM. | |
| 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 | l. |

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