CITY OF LOS ANGELES SPEAKER CARD

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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

Date 4 25 13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File 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	public comment, or to speak for or against a prop	posal on the agenda? () For proposal
Name: SAPAH S	sikich	() Against proposal () General comments
Business or Organization Affilial	ion: HEAL THE BAY	
Address: 1444 977	ST SANTA MONICA	(A 9040) State
Business phone: 310-45	ST SANTA MONICA City -1500 Representing: HAL THE	E BAY
	A PAID SPEAKER AND PROVIDE CLIENT IN	N, L
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 and information and submit this entire card to the presiding officer and information and submit this entire card to the presiding officer and information and submit this entire card to the presiding officer and information and submit this entire card to the presiding officer and information and submit this entire card to the presiding officer and information and submit this entire card to the presiding officer and information and submit this entire card to the presiding officer and information and submit this entire card to the presiding officer and information and submit this entire card to the presiding officer and information and submit this entire card to the presiding officer and information and submit this entire card to the presiding officer and information and submit this entire card to the presiding officer and information and submit this entire card to the presiding officer and information and submit this entire card to the presiding officer and information and informatio

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<i>I</i>			
Date 6/25/13	THE CITY COUNCIL'S F	40	File No., Agenda Item, or Case No.
I wish to speak before the	Crylouse		
·	Name of City Agency, Departme	ent, Committee or Council	
Do you wish to provide generate	al public comment, or to speak for or	r against a proposal on the ac	genda? (K) For proposal () Against proposal
Name: RAIG	ADWALLADER		() General comments
Business or Organization Affili	iation: Superiod four	MATION-SOUTH	BAY CHAPTER
Address: Po Bx	3825 MANHATTA	N BEACH, CA	90266
Street Rusiness phone: 3/0 - 5	15-3694 Representing: SUR	State	Zip
	E A PAID SPEAKER AND PROVIDE		BELOW:
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Client Name:			Phone #:
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Please see reverse of card for important information and submit this entire card to the presiding afficient

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Date	THE CITY COUNCIL'S AULES OF	Gornol Elle No.	Agenda Item, or Case No.		
	DECORUM WILL BE EMEORCED.				
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Do you wish to provide general public comment, on to speak for or against a proposal on the agenda? () For proposal Name: () General comments					
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:		Pho	one #:		
Client Address:Street	City	State	Zip		