CITY OF LOS ANGELES SPEAKER CARD Date Council File No., Agenda Item, or Case No. THE CITY COUNCIL'S RULES OF Km H DECORUM WILL BE ENFORCED. 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 proposal on the agenda? (X) For proposal Against proposal Alisa General comments Business or Organization Affiliation: Unleil Way - Busines Under Taste Face Los longelos 1150 S. Tolare St-Address: State Business phone: (215)808 - 1950 Representing: 140me Dationd 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.

CITY OF LOS ANGELES SPEAKER CARD

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| Date 1/2 - // | THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. | Council File No., Agenda Item, or Case No. | | | |
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| I wish to speak before the | CITY (M/MC/L) Name of City Agency, Department, Committee | e or Council | | | |
| Do you wish to provide general p | public comment, or to speak for or against a pro | posal on the agenda? (*For proposal | | | |
| Name: MIKE | | () Against proposal () General comments | | | |
| Business or Organization Affiliat | ion: <u>SKIX ROM AD</u> | MSIME TILLIST | | | |
| Address: <u>317</u> Street | . 714 ST. LA | · (A 9002/ | | | |
| Business phone: 2/3/083-052 Representing: | | | | | |
| CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: | | | | | |
| Client Name: | | Phone #: | | | |
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| 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. | | | | | |

| | CITY OF | LOS ANGELES SPEAK | ER CARD | DNS |
|---------------------------------|------------------------|---|----------------------------|---|
| Date 12/2/11 | | CITY COUNCIL'S RULES OF ORUM WILL BE ENFORCED. | Council File No., Ag | enda Item, or Case No. |
| wish to speak before the | (| Sity Council | | |
| | Name of C | ity Agency, Department, Committee | e or Council | -1515-F |
| Name: Stephar | vie Klas | ent, or to speak for or against a pro | ((| W For proposalAgainst proposalGeneral comment |
| Business or Organization | Affiliation: | L.A. Family | Housing | |
| Address: 7817 | Lankers | him Blud. Now | The Hollywood | 1 91605 |
| Stree Business phone: $SISZ$ | і 255-2700 р | City Representing: LA FAN | State 14 Howery | Zip |
| | | AKER AND PROVIDE CLIENT IN | U | |
| Client Name: | | | Pho | ne #: |
| | | | | .* |
| Client Address: Stree | t | City | State | Zip |
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| | CITY OF LOS ANGELES SPEAKER | CARD Do | wntown |
|----------------------------------|--|------------------------|--------------------------------------|
| Date 12/3/11 | THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. | Council File No., A | genda Item, or Case No. |
| 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 propose | l on the agenda?((|) For proposal) Against proposal |
| Name: | RITA DUTASCUS | (|) General comments |
| Business or Organization Affilia | tion: | | |
| Address: | | | |
| Address:Street | · · · · | State | Zip |
| Business phone: | Representing: | | |
| CHECK HERE IF YOU ARE | A PAID SPEAKER AND PROVIDE CLIENT INFOR | MATION BELOW: | |
| Client Name: | ······································ | Pho | ne #: |
| Client Address: | City | State | Zip |
| | for important information and submit this entire card t | o the presiding offic | · |
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CITY OF LOS ANGELES SPEAKER CARD Downtown

| Date 10/2/11 | | THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. | Council File No., Agenda Item, or Case No. | | | | |
|--|----------------|--|--|--|--|--|--|
| I wish to speak before | e the | Council | | | | | |
| . • | | Name of City Agency, Department, Committee or (| | | | | |
| Do you wish to provid | le general p | oublic comment, or to speak for or against a proposal | on the agend | a? () For proposal | | | |
| Name: | | Hynold Sachs | | Against proposal General comments | | | |
| Business or Organiza | tion Affiliati | on: | | - | | | |
| Address: | | City | | | | | |
| | Street | Representing: | State | Zip | | | |
| CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: | | | | | | | |
| Client Name: | | · | - | Phone #: | | | |
| Client Address: | | | | | | | |
| Client Address: | Street | City | State | Zip | | | |
| Please see revers | e of card fo | or important information and submit this entire card to | the presiding | officer or chairperson. | | | |
| NOTE: THIS IS A PUBLIC DOCUMENT. | | | | | | | |