

# CITY OF LOS ANGELES SPEAKER CARD

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

5/31/12

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

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

CF12-0600

HOMELESS LAHSA

I wish to speak before the

B + F Cmte

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

( ) Against proposal

General comments

Name:

SIM MEQUISTON

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:

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.

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Date

May 3, 2012

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

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

I wish to speak before the

City Council, Budget Committee

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

Against proposal

General comments

Name: Margie Guzman

Business or Organization Affiliation: El Nido Family Centers

Address: 13460 Van Nuys Blvd. Pacoima CA 91331

Street

City

State

Zip

Business phone: 818 896-7776 Representing: GR4D - Pacoima / Foot Hill Div.

CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

Client Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Client Address: \_\_\_\_\_

Street

City

State

Zip

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Date

5/3/12

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

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

I wish to speak before the

Council

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

( ) General comments

Name: <sup>DIEGO</sup> ~~GRAB REDUCTION~~ YOUTH DEVELOPMENT PROGRAM

Business or Organization Affiliation:

ALMA FAMILY SERVICES

Address:

1260 SOTO ST #15

LOS ANGELES

CA

90023

Street

City

State

Zip

Business phone:

323 695 9529

Representing:

GRYD BOYLE HEIGHTS

CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

Client Name:

Phone #:

Client Address:

Street

City

State

Zip

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

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

I wish to speak before the Children's Hospital Los Angeles Council  
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  
( ) Against proposal  
( ) General comments

Name: APOA CERDA

Business or Organization Affiliation: Children's Hospital Los Angeles

Address: 5000 Sunset Blvd LA CA 9002  
Street City State Zip

Business phone: (323) 301-3114 Representing: GRVD Northeast Area

CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

Client Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Client Address: \_\_\_\_\_  
Street City State Zip

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5/3/12

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

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

Housing Dept

*Bridgette Furrer*

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? ( ) For proposal

( ) Against proposal

( ) General comments

Name: \_\_\_\_\_

*Cheryl Parisi*

Business or Organization Affiliation: \_\_\_\_\_

*AFSCME / CRA / DC36*

Address: \_\_\_\_\_

*514 Malta Place*

*LA*

*CA*

*90020*

Street

City

State

Zip

Business phone: \_\_\_\_\_

*213 487-9887*

Representing: \_\_\_\_\_

CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

Client Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Client Address: \_\_\_\_\_

Street

City

State

Zip

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

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

Not Agendized by

I wish to speak before the

City Council - Budget + Finance #  
Name of City Agency, Department, Committee or Council Committee

Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? ( ) For proposal

( ) Against proposal

General comments

Name:

George Rheault

Business or Organization Affiliation:

Comments re: City Ethics  
Commission budget cuts

Address:

Street

City

State

Zip

Business phone:

Representing:

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Client Name:

Phone #:

Client Address:

Street

City

State

Zip

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