CITY)F LOS ANGELES SPEAKER ARD

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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 Solution	THE CITY COUNCIL'S RULES DECORUM WILL BE ENFORCE		Agenda Item, or Case No.		
	Name of City Agency, Department, Col	mmittee 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 Business or Organization Affiliation:					
Address:Street					
Street	City	State	Zip		
Business phone:	Representing:				
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLI	ENT INFORMATION BELO	w:		
Client Name:		Pr	none #:		
Client Address:	City	State	Zip		
011061	Only	Olate	*****		

Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

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Date J wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.			
Nan	ne of City Agency, Department, Committe	e 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:	on WILL		() General comments			
Business or Organization Affiliation:						
Address:Street	CA					
Street	City	State	Zip			
Business phone:	Representing:					
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:						
Client Name:		Pr	none #:			
Client Address:	City	State	Zip			

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Date CONOR 5, 2013 I wish to speak before the Na	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Ime of City Agency, Department, Committee or		genda Item, or Case No.		
Do you wish to provide general public	c fightment, or to speak for or against a propos	al on the agenda?) For proposal) Against proposal		
Name: Vonve	Mulelle AND		General comments		
Business or Organization Affiliation: _	Sel Community				
Address: 200 M	Jest Lith Street	-#F333	ACA 9001		
Business phone: 213 805-11	74 Representing: Set Curu	State	Žip /		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name:		Phor	ne #:		
Client Address:	Cit.	Q1-11-	-77:-		
Street	City	State	Zip		

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