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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 3 6 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	c comment, or to speak for or against a proposa	al on the agenda? (ీ) For proposal			
1 2/2	1.19164	(C) Against proposal			
Name:	WILZII	() General comments			
Sharing, and					
Business or Organization Affiliation: _					
· ·	LA				
Address:Street	City	State Zip			
Business phone:	Representing:				
CHECK HERE IF YOU ARE A PA	ID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:			
Client Name:		Phone #:			
Client Address:		·			
Street	City	State Zip			

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

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1	al public comment, or to speak for or against a prop	oosal on the agenda? () For proposal () Against proposal			
Name:	In WALSH	() General comments			
Business or Organization Affili	ation:				
Address:	4				
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					
Street	City	State Zin			

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Date 3	13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	7, Agenda Item, or Case No.
I wish to speak before	\ e the			\
		ne of City Agency, Department, Committee or)
Do you wish to provid	le general public d	comment, or to sp g ak for or against a propps	sat on the agenda	() For proposal
Name:			4	() Against proposal () General comments -
Business or Organiza	tion Affiliation.		7	
Address:				
	Street	City	State	Zip
Business phone:		Representing:		
·		SPEAKER AND PROVIDE CLIENT INFO	ORMATION BEL	ow:
Client Name:			F	Phone #:
Client Address:				
5	Street	City	State	Zip

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I wish to speak before the	City COUNC.		
	Name of City Agency, Department, Committee or	r Council	
	public comment, or to speak for or against a propos		? () For proposal () Against proposal () General comments
Name:	JOVIN OU A DOLL		() General comments
Business or Organization Affiliati	ion:		
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	DRMATION BELC	ow:
Client Name:		P	hone #:
Client Address:	City	State	Zip

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