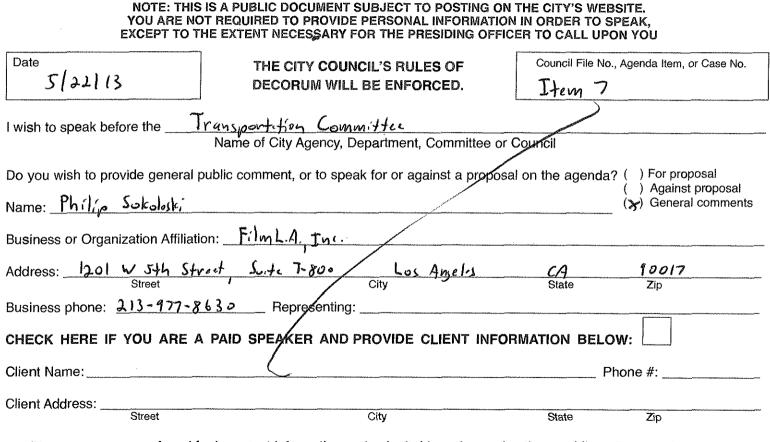
CITY	OF LOS ANGELES SPEAKER	CARD		
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Date 5-22-13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED	13-00	Agenda Item, or Case No.	
I wish to speak before theName	L COUNCIL TRANSPO- ne of City Agency, Department, Committee or C	CTATION Council	COMMETTEE	
Do you wish to provide general public c Name: <u>DENNIS</u> HTN	comment, or to speak for or against a proposal	on the agenda?	<ul> <li>For proposal</li> <li>Against proposal</li> <li>General comments</li> </ul>	
Business or Organization Affiliation:				
Address: 4406 CAHUEN64	A BLUD TOLUCA LAKE	CA	91602	
	/	State	Zip	
Business phone: CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFORM	MATION BELO	w:	
Client Name:		PI	none #:	
Client Address:Street	City	State	Zip	
<u>Please see reverse of card for impo</u>	ortant information and submit this entire card to	the presiding o	fficer or chairperson.	

YOU ARE NO	IS A PUBLIC DOCUMENT T REQUIRED TO PROVID HE EXTENT NECESSARY	E PERSONAL INFORMATI	ON IN ORDER TO	SPEAK,	
Date 5/22/13		NCIL'S RULES OF L BE ENFORCED	Council File N	No., Agenda Item, or Case No イイフ ら	 0.
I wish to speak before the	Transport	Department Committee			Acres 1000
Do you wish to provide general p	public comment, or to spe	/		<ul> <li>Against proposal</li> </ul>	
Name: <u>Alek E</u> Business or Organization Affiliati		y Biayde	Coalition	()General commer	nts
Address: <u>634</u> <u>S</u> <u>S</u>			CA State	90014 Zip	
Business phone: 213 (029 2	242 Representing	۲ <u> </u>			
CHECK HERE IF YOU ARE A	PAID SPEAKER AND	PROVIDE CLIENT INF			
Client Name:				Phone #:	
Please see reverse of card f	or important information a	City and submit this entire car	State	Zip zip	



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YOU ARE NO	S IS A PUBLIC DOCUMENT SUBJECT TO POSTIN OT REQUIRED TO PROVIDE PERSONAL INFORM. THE EXTENT NECESSARY FOR THE PRESIDING (	ATION IN ORDER TO SP	EAK,
Date 5/22/13	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		
Name: ED DIE	public comment, or to speak for or against a pro FY ion: TEAMSTERS LOCK		<ul> <li>( ) For proposal</li> <li>( ) Against proposal</li> <li>( ) General comments</li> </ul>
Business or Organization Affiliati Address:	ion: <u>IEHMSIARS</u> (DC) City	State	Zip
	A PAID SPEAKER AND PROVIDE CLIENT I		
Client Name:	•	Pho	one #:
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.

YOU ARE NO	IS A PUBLIC DOCUMENT SUB TREQUIRED TO PROVIDE PE HE EXTENT NECESSARY FOR	RSONAL INFORMATION	IN ORDER TO	O SPEAK,
Date 5/22/13	THE CITY COUNCIL DECORUM WILL BE		Council Eile	No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Depa	chòn artment, Compatitee or C	ouncil	•
Do you wish to provide general	public comment, or to speak for	or or against a proposal	on the agen	da?()For proposal
Name: Adriana	Fernandez.			Against proposal
Business or Organization Affiliation Affiliation Address: $5 2 $ VA	on: Valley 100	withy + Com	mce	Arsociation
Address: 5/2/ Va	n Nuys Blud	Cheme Oak	P CA	91403
Business phone: <u><u><u>R</u></u><u><u>R</u><u>R</u><u>R</u><u>R</u><u>R</u><u>R</u><u>R</u><u>R</u><u>R</u><u>R</u><u>R</u></u></u>	2545 Representing:		Sidle	Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PRO	OVIDE CLIENT INFOR	MATION BE	LOW:
Client Name:			,	Phone #:
Client Address:Street	Ci	ity	State	Zip
Please see reverse of card f	or important information and s	submit this entire card to	the presidir	a officer or chairperson.

YOU ARE N	S IS A PUBLIC DOCUMENT SUBJE OT REQUIRED TO PROVIDE PERS THE EXTENT NECESSARY FOR TH	ONAL INFORMATION IN	ORDER TO	SPEAK,
Date 5/22/13	THE CITY COUNCIL'S DECORUM WILL BE E		Council File No	o., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Departm			
Do you wish to provide general	public comment, or to speak for c	or against a proposal o	n the agenda	? ( ) For proposal
Name: Savah Wo	1lsh			<ul> <li>( ) General comments</li> </ul>
Business or Organization Affiliat	tion: MOGONACH	ve Associo	then	of America
Address: 15301 Ven	traBlyd Sherr	nan Oaks	CA	491403
Business phone: 818 93	5584 Representing:		State	۲.p
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVI	DE CLIENT INFORM	ATION BEL	ow:
Client Name:	·······		F	Phone #:
Client Address:	City		State	Zip
Please see reverse of card	for important information and sub	mit this entire card to t	he presidina	officer or chairperson

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NOTE: THIS IS A PUBLIC DOCUMENT SUBJECT TO POSTING ON YOU ARE NOT REQUIRED TO PROVIDE PERSONAL INFORMATION EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFIC	N IN ORDER TO SPEAK,	#7			
Date THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Iten	n, or Case No.			
I wish to speak before the	MATE	·······			
Do you wish to provide general public comment, or to speak for or against a proposa	al on the agenda?()For p	nst proposal			
Name: <u>Ilyanne</u> Morden Kicharen Business or Organization Affiliation: <u>SAGAFTRA</u>	( ) Gene	eral comments			
Address: 5757 Wilshire Blud Los Angele, Street	2 <u>S (A</u> 91423 State Zip				
Business phone: 3235496701 Representing:					
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name:	Phone #:	······································			
Client Address:	State Zip				
Please see reverse of card for important information and submit this entire card to	·······	nairperson.			