CITY OF LOS ANGELES SPEAKER CARD

13-0479

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	THE CITY COUNCIL'S RUI	ES OF Council File	No., Agenda Item, or Case No.				
JUNE 14, 7013	DECORUM WILL BE ENFO	PRCED. ITEM 计	ITEM# 7				
I wish to speak before the CITY 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							
Name: KBISTEE	CUL	·	() Against proposal () General comments				
Business or Organization Affiliation: SUNLAND- TULUNGA NEIGHBOUGOD COUNCIL							
Address: 965 Hillh	auen Aue. Tusu	UGA CA.	9042				
Business phone:(<u>\$18) \$06</u>	City Representing: ENT	TERTAIWUENT	INDUSTRY				
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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EXCEPT TO THE EXTENT NECESSART FOR THE PRESIDING OFFICER TO CALL DPON YOU							
Date 6-14-2013	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.					
I wish to speak before the LOS ANGEGES CITY COUNCIL Name of City Agency, Department, Committee or Council							
Do you wish to provide general p	public comment, or to speak for or against a propose	al on the agenda	? (X) For proposal () Against proposal () General comments				
Business or Organization Affiliation Address: 4406 CARUE	SUBA OLUD TOLUCA LAKE	CA	91602				
	City Representing:	State	Zip				
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:							
Client Name:		F	Phone #:				
Client Address:Street	City	State	Zip				

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Date 6/14/13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	ا السلام	Council File No	o., Agenda Item, or Case No.		
I wish to speak before the	City Council					
	Name of City Agency, Department, Comm	ittee or C	ouncil			
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () Against proposal Name:						
Business or Organization Affiliation	on: LA county Bicy	de	(Dau	nest		
Address: 634 S.	Spring #821 /A		CA	90014		
Street Business phone: 213 (229)			State	Zip		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:						
Client Name:				Phone #:		
Client Address:						
Street	Çity		State	Zip		

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