13-1183

## 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	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or t	Case No.
10/25	DECORUM WILL BE ENFORCED.	#/	
I wish to speak before the		OVAJCÍ (	
	Name of City Agency, Départment, Commit	tee or Council	
Do you wish to provide gener Name:	al public comment, or to speak for or against a p	roposal on the agenda? ( → For propos ( ) Against propose ( ) General c	roposai
	···		
Business or Organization Affil	iation:		
Address:			
Address:Street	City	State Zip	
Business phone:	Representing:		allahaya kaya daya ayaa ayaa ayaa ahaa ahaa ahaa a
CHECK HERE IF YOU ARE	E A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:	
Client Name:		Phone #:	
Client Address:		Canada	
Street	City	State Zip	

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Date    Date    Date    Date    Date		THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.  of City Agency, Department, Committee or		Agenda Item, or Case No.
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? ( ) For proposal  Name:				
Address:	Street	City	State	Zip
Business phone:		Representing:		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:			Pho	one #:
Client Address:	Street	City	State	Zip

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Date 10/25/13		COUNCIL'S RUI I WILL BE ENFO		Council File No., Age	enda Item, or Case No.
I wish to speak before the	Name of City Age	ncv/Department	JNC/C Committee or Co	uncil	
Do you wish to provide general p	ublic comment, or t	o speak for or a	gainst a proposal o		For proposal ) Against proposal
Name: <u>EL/ZA</u> Business or Organization Affiliation	<i></i>	Teth Por	SON S HIBOMI (6)	Pollo	) General comments
Address: 400 A	mund s	treet	UNIT 80	B 14	CA 90013
Street Business phone: -213-620-1	1904 Represe	City / enting:	JONNY ZA	State /	Zip
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name: GR.	ANPA.	JOHNSON	15 LLC	Phone	e #:
Client Address: 1639	Cavenga i	SLVd City	14011 JW00	State (U	900 EG

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Date 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	Name of City Agency, Department, Committee or	r Council			
Name: MV. H	oublic comment, or to speak for or abainst a proposed on:		nda? ( ) For proposal ( ) Against proposal ( ) General comments		
Address: Street	City	State	Zip		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
	PAID SPEARCH AND PROVIDE CLIENT INFO		Phone #:		
Client Address:Street	City	State	Zip		