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 12/15/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED		o., Agenda Item, or Case No.	
I wish to speak before the		0 1		
Do you wish to provide general por Name:	Name of City Agency, Department, Composition of City Agency, City A		? () For proposal () Against proposal () General comments	
Business or Organization Affiliati	on: Coalition for Econom	ic Survival		
Address: 514 Shath 1	71 Suite 270 LA City	CA State	9 0020 Zip	
	Representing:			
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIEN	NT INFORMATION BELO	OW:	
Client Name:		F	Phone #:	
Client Address:	City	State	Zip	