## **CITY OF LOS ANGELES SPEAKER CARD**

Date: 04/25/2017

I wish to speak before the Council

Council File No., Agenda Item, or Case

Item NO. (3) - 13-1724

| Do you wish to provide  | general public comment, or to | speak for or against a proposal on the agenda? For | or Proposal |       |
|-------------------------|-------------------------------|--|-------------|-------|
| Name: Rafik Ghaz        | arian                         |  |             |       |
| Business or Organizatio | n Affiliation:                |  |             |       |
| Address:                |                               |  |             | 90027 |
|                         | Street                        | City   | State       | Zip   |
| Business Phone: 323     | 3711511                       | Representing: Los Feliz Village BID                |             |       |
| CHECK HERE IF YOU       | ARE A PAID SPEAKER AND        | PROVIDE CLIENT INFORMATION BELOW:                  |             |       |
| Client Name:            |                               |  | Phone#:     |       |
| Client Address:         |                               |  |             |       |
|                         | Street                        | City   | State       | Zip   |

## **CITY OF LOS ANGELES SPEAKER CARD**

Date: 04/25/2017

Client Address:

Street

I wish to speak before the Council

Council File No., Agenda Item, or Case

State

Item NO. (3) - 13-1724

Zip

| Do you w  | rish to provide general public comment, or | to speak for or against a proposal on the agenda? | General Comment |     |
|-----------|--|---|-----------------|-----|
| Name: _   | ARNOLDSACHS                                |   |                 |     |
| Business  | or Organization Affiliation:               |   |                 |     |
| Address:  |  |   |                 |     |
|           | Street                                     | City  | State           | Zip |
| Business  | Phone:                                     | Representing:                                     |                 |     |
| CHECK I   | HERE IF YOU ARE A PAID SPEAKER AN          | D PROVIDE CLIENT INFORMATION BELOW:               |                 |     |
| Client Na | me:  |   | Phone#:         |     |

NOTE: INFORMATION PROVIDED WILL BE MADE PART OF THE PUBLIC RECORD

City

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|---|-------------------------------------|-------------------------|-----------------|-----|
| Do you wish to provide general public com | nment, or to speak for or against a | proposal on the agenda? | General Comment |     |
|   |                                     |                         |                 |     |
| Name: Jwalsh                              |                                     |                         |                 |     |
| Business or Organization Affiliation:     |                                     |                         |                 |     |
|   |                                     |                         |                 |     |
| Address:                                  |                                     | La                      |                 |     |
| Street                                    |                                     | City                    | State           | Zip |
| Business Phone:                           | Representing: J\                    | walsh Confidental       |                 |     |
| CHECK HERE IF YOU ARE A PAID SPE          | AKER AND PROVIDE CLIENT IN          | FORMATION BELOW:        |                 |     |
| Client Name:                              |                                     |                         | Phone#:         |     |
| Client Address:                           |                                     |                         |                 |     |
| Stre                                      | eet                                 | City                    | State           | Zip |